

# **S.D. Consumer's Guide to Medicare, Medicare Supplement Insurance, and Beneficiary Resources 2004**

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**1-800-536-8197  
shiine @ cfag.org**

**Rapid City Office:**  
Dakota Plains Legal Services  
528 Kansas City Street, Suite 1  
P.O. Box 1500  
Rapid City, SD 57709  
Phone (605) 342-7171  
1-800-742-8602  
Fax (605) 348-5874  
E-Mail: dplsrc10@qwest.net



**Main Office:**  
Center for Active Generations  
2300 W. 46th Street  
Sioux Falls, SD 57105-6528  
Direct Dial (605) 333-3314  
1-800-536-8197  
Fax (605) 336-7471  
E-Mail: thoy@cfag.org

# How to Use This Book

This is a reference book. It is packed with information. It is not likely that you will read it from cover to cover! Instead you should use the Table of Contents to identify the topics that interest you.

The book is designed to help you see the gaps in Medicare coverage and understand and shop for private insurance to fill some of the gaps. The book has seven sections, each with its own contents page.

1

## Medicare & Its Gaps

Pages 1-10

This is a very brief outline of some of the most basic things about Medicare, including enrollment procedures and coverage and costs of Parts A and Part B. The focus is on what is **not covered**. Those are the gaps that you must fill either from your own pocket or with private insurance.

2

## Medicare Supplement Insurance (Medigap) Pages 11-25

Medigap insurance is by far the most popular choice, and much of this book focuses on Medigap.

Medigap policies are standardized, and companies sell one or more of ten different plans. We have provided a very brief description of the benefits covered by each plan.

Medicare Plus Choice: Pages 25-26

3

## Medigap Premium Comparisons Pages 27-60

Using information provided by 20 insurance companies, this section compares annual premiums for every Medigap plan for customers at different ages.

The “price shopper” (55-60) helps you spot the lowest price for each plan at age 65.

The Company Directory (61-63) has contact information for all companies that responded to the SHIINE survey.

4

## Filling the Drug Gap

Pages 64-70

Prescription drugs are a big gap in Medicare coverage--and this can be one of the hardest (and most expensive) to fill.

This section includes information about the latest changes in Medicare’s drug coverage, discount cards offered by private companies, and programs that provide free drugs for low income people.

5

## Appendix

Pages 71-88

The extensive appendix includes definitions of Medicare and insurance terms, a list of Medicare publications, and directories for getting Medicare help for friends and relatives in other parts of the country.

This Consumer Guide  
was written by  
**Noel Morgan**  
Consultant to the  
South Dakota Department  
of Social Services  
nmorgan@fuse.net

Read about SHIINE: Page 100

# Medicare & Its Gaps

This section points out the gaps in Medicare coverage and your options for filling them.

This is a very brief outline of some of the most basic things about Medicare, including enrollment procedures and coverage and costs of Parts A and Part B. The focus is on what is **not covered**. Those are the gaps that you must fill either from your own pocket or with private insurance.

	Page
Medicare Enrollment .....	2
Medicare Choices .....	3
Medicare Basics .....	4
Part B & Assignment .....	5
Gaps at a Glance .....	6
Gap Filler Choices .....	7
Can't Afford Medicare Expenses? .....	8
Medicare & Employer's Retirement Health Plan .....	9
Is Your Retirement Plan Enough? .....	10



**Medicare  
& You  
2004**

Every fall Medicare mails each Medicare household a copy of its basic handbook, *Medicare & You*.

To order a copy of the handbook, call

 **1-800-633-4227**

Call SHINE for Free Medicare counseling 1-800-536-8197

# Medicare Enrollment

## Medicare Eligibility

To qualify for Medicare, you must receive Social Security or Railroad Retirement

**and be either**

- Age 65      or      ■ Disabled

***Even if you retire early and start receiving Social Security at 63, Medicare does not start until the month you turn 65.***

## Most People Must Apply

If you will not start receiving Social Security until you turn 65, you have to apply for Medicare. You do not get Medicare automatically just because you started receiving Social Security.

You can apply by contacting the Social Security Administration (or Railroad Retirement Board).

### **Your Enrollment Period Lasts 7 Months.**

**Starts:** 3 months **before** your 65th birthday month

**Ends:** 3 months **after** your birthday month.

## Apply Early !

To be sure you have Medicare coverage as soon as you turn 65, you must apply three months **before** your birthday month.

If your birthday is in July, you should apply for Medicare in April.

If you wait until the month you turn 65 your Part B coverage may not start for another 3 months.

## Late Penalty

If you **fail** to apply within the first three months **after** your 65th birthday....

- you will have to wait until the next January to enroll;

**and**

- you won't get Medicare until the following July;

**and**

- your Part B premium will be 10% higher for each year you wait.

## Automatic Enrollment?

### For Early Retirees or Disabled Only

## Retired Early (pre-65) ?

If you have Social Security because you retired before age 65, you will be enrolled automatically in Medicare, effective the month you are 65. Your Medicare card will be mailed to you about 3 months before your 65th birthday.

## Disabled?

24 months after you start receiving Social Security because of a disability, you will be automatically enrolled in Part A and Part B.

Your Medicare card will be mailed to you about 3 months before coverage starts.

## Working past 65?

If you (or your spouse) continue working after you're 65, **and** you have health coverage through your job, you can delay enrollment in Medicare Part B without a penalty.

You can enroll without a penalty anytime while you are still working or up to 8 months after your job or health coverage end.

If you enroll in the first month, coverage will start that month. If you enroll in the next 7 months, coverage will start the first day of the month after you enroll.

## To enroll in Medicare

Contact your local Social Security office  
or call

1-800-772-1213.

**Enroll on-line**

[www.medicare.gov/Basics/HowToEnroll.asp](http://www.medicare.gov/Basics/HowToEnroll.asp)

# Medicare Choices

There are now **3** different ways you can receive Medicare benefits.

1

## "Original" Medicare

Medicare is constantly changing. But the basic framework has not changed. Original Medicare is a "fee-for-service" program.

- Your health care provider charges you a fee. Medicare generally pays most of the bill, and you are responsible for paying the rest.
- You can pay your share out of your pocket or with health insurance.
- Most of the focus in this book is on filling the gaps in the Original Medicare Plan.

### Medicare + Choice

"Medicare + Choice" is how Medicare describes your other two ways of receiving Medicare. You stay in the Medicare system, but your benefits go through the "Choice" providers. *Details on pp. 25-26*

## Medicare + Choice

2

### Medicare + Managed Care

A private insurance company contracts with Medicare to take care of your health. This is generally a health maintenance organization (HMO).

- Medicare pays the HMO a set amount of money for each member every month.
- You must use doctors and hospitals that are in the HMO's provider network.
- You will not have Medicare coverage at all if you go outside the network.
- As long as you stay within the network, your Medicare-approved health expenses will be limited to the HMO's premium and small payments to the HMO for each service.

***Medicare HMO is not now available in South Dakota.***

3

### Private Fee For Service (PFFS)

Medicare pays an insurance company a set amount to pay for services Medicare covers.

- The PFFS company (not Medicare) decides how much to pay doctors and other providers.
- You pay a premium to the PFFS company as well as any difference between the provider's bill and the PFFS payment.

***Sterling & Humana are the only companies selling PFFS in South Dakota. Details on pages 25-26.***

Default = "Original" Medicare

If you are new to Medicare, you have "original" Medicare unless you make another choice.

# Medicare Basics

**Medicare is divided into two parts called “Part A” & “Part B”.**

## Part A: Hospital Insurance

**A**

Helps pay  
For

Part A helps pay for your care in hospitals, skilled nursing facilities, and hospice. It also pays for some home health care.

Cost

Part A is “free” if you or your spouse paid Medicare taxes while working. This is most people and includes teachers and local government workers who may not receive Social Security but did pay Medicare taxes.

If you did not pay Medicare taxes, you may be able to **buy** Part A coverage. In 2004 the monthly premium for most buyers is **\$343**. Some people qualify to buy it for **\$189**.

Deductible

The Part A deductible is based on “benefit periods.” You must pay the deductible each time you go into the hospital after having been out of the hospital for more than 60 days in a row. After you pay the deductible, Medicare pays most hospital expenses for the first 60 days in a benefit period. In 2004 the deductible is **\$876**.

Coinsurance

You start paying a share of your daily hospital bills after you have been in the hospital or skilled nursing facility for 60 days in a benefit period. For days 61-90 the daily coinsurance in 2004 is **\$219**. For days 91-150, the daily coinsurance is **\$438**.

If you need **skilled nursing care** after spending at least 3 midnights in a hospital, Part A **may** cover the full cost of care in a skilled nursing facility for 20 days and all but **\$109.50** per day (in 2004) for another 80 days. Part A also pays most of the cost of hospice care.

**B**

## Part B: Medical Insurance

Helps pay  
for

Part B helps pay for covered doctor services that are medically necessary. It pays part of the cost of doctors (**in and out of hospital**), outpatient hospital care, and some other medical services that Part A does not cover, such as the services of physical and occupational therapists, and some health services.

Cost

Part B is not “free.” You must pay a monthly premium to get Part B. This is generally deducted from your Social Security check. In 2004 the monthly premium is **\$66.60**. The premium will be higher if you enroll late.

Deductible

Part B has an annual deductible of **\$100**. That means you (or your private insurance) must pay the first \$100 of **covered** medical expenses each year.

Coinsurance

After the deductible, you (or your insurance) must pay 20% of the amount that Medicare approves for medical expenses. If your doctor does not accept assignment, you may have to pay an additional 15% above the Medicare-approved amount. Your coinsurance for mental health services is 50% instead of 20%. **Assignment is explained more fully on the next page.**

Medicare amounts change every year.  
The amounts in this book are in effect for 2004.



## Part B & Assignment

### Part B Co-payment

Medicare generally pays 80% of the amount it approves under Part B. This includes doctors, durable medical equipment, home care services, etc.

You or your insurance company must pay the remaining 20% of the Medicare-approved amount. That's the Part B coinsurance.

### Excess Charge: Can Add 15%

Doctors who do not take assignment are allowed to add another 15% to the approved charge. This 15% is called the "balance bill" or "excess charge."

### Taking Assignment

A doctor who "takes assignment" agrees to accept the Medicare-approved amount as "payment in full."

When the doctor takes assignment, you pay only the 20% of the bill that's left after Medicare has paid its 80% share.

### Participating Providers

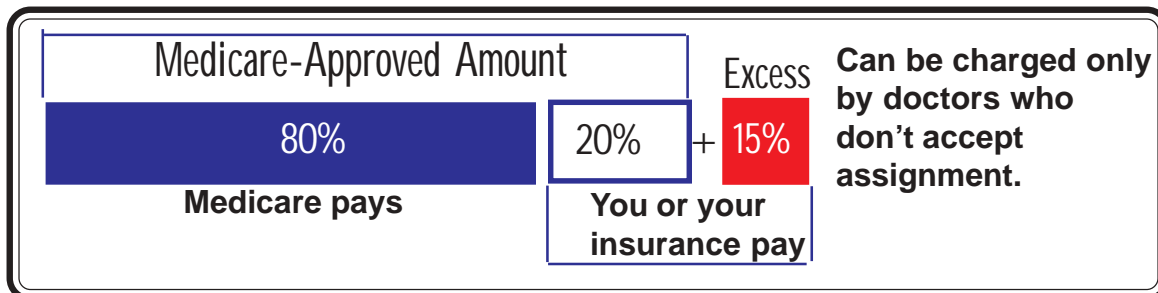
A participating provider is a doctor or other health care provider who has signed a contract with Medicare promising to take assignment for all patients or customers.

### Ambulance Services

Ambulance providers must take assignment on **all** claims.

### Exceptions

- Medicare pays only 50% of the approved amount for outpatient mental health.
- The excess charges limit of 15% applies only to doctors. Other providers (such as companies that sell durable medical equipment) who don't participate in Medicare can charge as much as they want.



### Look for Participators !

Not all providers "participate" in Medicare Part B.

- The level of "participating providers" in Medicare Part B for South Dakota is below the national average.

Medicare will send you the **Medicare Participant Directory**.

1-800-437-4762

or on line at:

[www.noridianmedicare.com/bene/services/2003\\_medpard.html](http://www.noridianmedicare.com/bene/services/2003_medpard.html)

### ShareCare

- ShareCare is a program of the South Dakota Medical Association.
- The program matches low income persons with doctors who will accept assignment for ShareCare members.
- Physicians agree to waive amounts applied to your deductible and coinsurance.
- You sign up for ShareCare by completing an application certifying that your income is less than 150% of the poverty level.
- In 2004 that means annual income under \$18,740 for a couple or \$13,970 for a single person.

Call for a ShareCare application.

605-336-1965

## Gaps at a Glance

The gaps in Medicare are the things that Medicare does not pay for. You can fill gaps either by paying for the services when you need them or buying a health plan that will make the payments for you.

The list on this page shows most of the gaps. All amounts are for the year 2004.

### Things Medicare Covers Partially

#### Deductibles

**Part A** \$876 per benefit period

**Part B** \$100 per year

The first 3 pints of blood

#### Coinsurance

##### Part A

##### Hospital: Daily coinsurance

- \$219 for 61st to 90th days
- \$438 for 91st to 150th days
- All expenses after Medicare ends

##### Skilled Nursing Facility: Daily coinsurance

- \$109.50 for 21st to 100th day
- All expenses after 100th day

##### Part B

20% of Medicare-approved charges  
Doctor's balance bill (excess charge)

### Expenses Medicare Doesn't Cover at All

- Health care not approved by Medicare
- Prescription drugs (outside hospital)
- Routine physical exam
- Skilled nursing facility charges after 100 days
- Long-term care (custodial care in a nursing home)
- Dental expenses
- Routine eye exams & glasses
- Hearing aids
- Most chiropractic services
- Emergency care outside U.S.A
- Private duty nursing
- Private hospital room
- Acupuncture
- Experimental procedures
- Cosmetic surgery

### 7 Ways to Fill Gaps in Medicare

- Buy a Medicare Supplement Insurance policy (MediGap).

**Pages 11-63**

- Join a Medicare Health Maintenance program.

*(Not now available in South Dakota)*

- Join a Private Fee-For-Service (PFFS) Plan.

**Pages 25-26**

- Health insurance provided by your employer or retirement plan.

**Pages 9-10**

- Medicaid (low income).

**Page 8**

- Drug Discount Cards

**Pages 65-69**

- Prescription assistance plans (low income)

**Page 70**

- Pay your own way !

### SHINE Counselors can...

- ☑ answer questions about Medicare and supplemental insurance products;
- ☑ help submit claims for private insurance and Medicare;
- ☑ help solve problems with health insurance companies, Medicare, and Medicaid.



# Medicare Gap Filler Choices

- There are several different ways to fill the gaps in Medicare coverage.
- You have to choose the one that best fits your needs--and pocket.

## Features

### Medicare Supplement Insurance

- Known as **Medigap** or **MedSup**
- Sold statewide by over 30 companies

Pages 11-65

- ☐ Choice of 10 policies especially designed to fill Medicare gaps.
- ☐ No restrictions on what doctors or hospitals you use.

### Medicare Select

- Sold only by Avera Select
- Not available statewide

Page 16

- ☐ The same plans as Medigap.
- ☐ You must use specific doctors and hospitals.

### Medicare HMO

- Not now sold in South Dakota
- Also called "Medicare + Choice"

- ☐ Managed care
- ☐ You must use specific doctors and hospitals.
- ☐ Small co-payments for doctor visits.
- ☐ May include more benefits (e.g. vision care) than Medigap or other options.

### Private Fee For Service

- Sold only by Sterling Life Insurance Co. and Humana.

Pages 25-26

- ☐ Medicare-approved private insurance plan.
- ☐ Provides all Medicare benefits.
- ☐ Use any providers who will agree to accept company's payments.
- ☐ No limit on provider charges

### Private Retirement Plan

- Provided by your employer or union

Pages 9-10

- ☐ No standards.
- ☐ Probably will **not** fill some big gaps in Medicare.
- ☐ Depends entirely on the union or employer.

## State-Funded Gap Fillers for Low Income Persons on Medicare

### Medicaid

Page 8

- ☐ Fills most Medicare gaps; includes drugs
- ☐ Higher income than Medicaid

### Qualified Medicare Beneficiary (QMB)

Page 8

- ☐ Fills most Medicare gaps
- ☐ Pays Part B deductible
- ☐ No outpatient prescription drug coverage

### Specified Low-Income Medicare Beneficiary (SLMB)

- ☐ Pays only the Part B deductible

## Can't Afford Medicare Expenses?

## Medicaid

Medicaid is a joint federal and state program that helps pay medical costs for people with low income and limited resources.

### Full Medicaid

If you have full Medicaid, Medicaid will pay your Part B premium and most of your other expenses that are not covered by Medicare (including prescription drugs).

***Eligibility for Medicaid and the Medicare Savings programs is based on your income and assets. The income limits increase every year.***

## Medicare Savings Programs

If you do not qualify for full Medicaid, you may still qualify for one of these **Medicare Savings** programs. They are more limited versions of Medicaid.

### QMB

#### Qualified Medicare Beneficiary

**QMB** pays the Medicare Part B premium (\$58.70 per month), all deductibles, and co-payments.

QMB's benefits are close to the benefits in a Medigap Plan C.

#### Monthly Income Eligibility

Individual: \$776

Couple: \$1,041

### SLMB

#### Specified Low-Income Medicare Beneficiary

**SLMB** pays the monthly premium for Medicare Part B.

#### Monthly Income Eligibility (2004)

Individual: \$931

Couple: \$1,249

### QI

#### Qualifying Individual

**QI-1** will pay the Medicare Part B premium.

#### Monthly Income Eligibility

Individual: \$1,048

Couple: \$1,406

#### Other Qualifications for These Programs

- Enrolled in Medicare Part A
- Assets limit (bank account, stocks, etc.)  
Individual: \$4,000  
Couple: \$6,000

### Medicaid & Medigap

If you already have a Medigap policy and become eligible for Medicaid, you have the right to **suspend** your Medigap policy for two years. If your income goes back up, you can go back to the Medigap even with bad health.



### Questions & Applications



- SD Department of Social Services
- Check phone book for your local office
- SHIINE: 1-800-536-8197

# Medicare & Your Employer's Retirement Health Plan

If you have been covered by your employer's health care plan, you may have to make some important decisions when you turn 65.

We have shown some of them on this page.  
Medicare has an entire book on this topic!

## Required Enrollment

Your employer's or union's retirement plan may require you to join Medicare as soon as you turn 65.

Even if you don't join Medicare, the retirement plan may pretend you did and stop paying for anything that Medicare would have paid for if you had joined Medicare.

That could make you responsible for some very big medical bills!

## Compare Benefits & Premiums

Some retirement health plans are "free" because they are included as part of your pension benefits. No matter how weak the benefits are, you should hold onto such plans.

If your retirement benefit plan requires you pay monthly premiums, you should compare the costs and benefits of that plan with the alternatives described in this Guide.

***There's more about retirement plans on the next page.***

## Still Working after 65 ?

If you're still working after you turn 65, you have two choices:

- Join Medicare Part B now
- Wait until you retire

If your employer has at least 20 workers, when you turn 65 you are entitled to continue on the employer's health plan, with the same benefits as younger workers.

You do **not** have this right if your employer has fewer than 20 workers.

Even if you continue to work after you turn 65, you should sign up for Part A of Medicare.

**Part A** has no premiums and may help pay some of the costs not covered by your employer's plan.

However, because you must pay monthly premiums for Part B, it may be a good idea to wait, and enroll in Part B when you retire.

Discuss your retirement options with  
the person who handles your  
employer's health plan.

SHIINE's Volunteer Counselors  
Can help you sort this all out!  
**1-800-536-8197**

## Is Your Retirement Plan Enough?

- Insurance laws generally do not apply to retirement health plans.
- There are no standards for these plans. Some have excellent coverage. Some do not.
- This page should help you decide whether you need to buy additional insurance when you become eligible for Medicare.

### How Does the Retirement Plan Treat Medicare Payments?

#### *Example*

- Before you retired, your plan always paid 80% of your medical bills. If the doctor charged \$100, the plan paid \$80, and you had to pay the other \$20.
- When you retire, Medicare will pay 80% of Medicare-approved expenses.



the big question:



How will your retirement plan treat the remaining 20%?

## 3 typical answers

1

### Plan Pays Balance

The retirement plan promises to pay whatever is left after Medicare has paid.

***You've got great coverage. As long as it is affordable, you probably do not need any more insurance.***

Or

2

### Plan Pays Part of Balance

The retirement plan will pay 80% of whatever Medicare does not pay.

That means the Plan will pay 80% of your 20% Co-payment. That would leave you having to pay only \$4 on a \$100 expense (Medicare pays \$80, retirement plan pays \$16).

***This is good coverage. You probably do not need to buy any more insurance.***

3

Or

### Plan Pays \$0 !

The Plan substitutes Medicare's payment for its own.

When Medicare pays 80% of the bill, the retirement plan will pay nothing. You will have to pay the remaining 20%. This kind of plan is often called a "Medicare carve out."

***This is not a very good retirement plan. You probably need additional insurance.***

***These are only examples. Because there are no standards for retirement plans, your retirement plan may not fit any of these examples.***

***Read your benefit booklet & talk to the person who administers your plan.***

## Prescription Drug Coverage ?

Many retirement plans have a prescription drug benefit.

Because Medicare does not cover prescription drugs, this can be one of the best reasons to hold onto a retirement plan, even if the other benefits are not very good.

***For other drug options, see pages 64-70.***

# 2

## Medicare Supplement Insurance (Medigap)

This section provides general information about  
Medicare Supplement Insurance policies

	Page
Medicare Supplement Insurance .....	12
Medigap Basic Benefits: Plan A .....	13
Medigap Shopping List Adding Benefits to the Basics ...	15
Medicare Select .....	16
How Policies Can Differ .....	18
Medigap Open Enrollment .....	19
After Open Enrollment: Health Underwriting .....	20
Disabled & Under 65? .....	21
Answers to Some Questions About Medigap.....	22
Medigap Shopping Tips .....	23
Medigap Replacement.....	24
Medicare +Choice: PFFS Plans .....	25

Company Premiums Start on Page **30**  
Annual Prices Shown for  
23 Different Companies  
Under Age 65  
Ages 65, 70, 75, 80

# Medicare Supplement Insurance Medigap

## Standardized Since 1992

Before 1992 insurance companies sold a lot of different policies. No two companies had exactly the same policy. That made it very hard and confusing for consumers to shop for Medigap coverage.

In 1992 Medigap policies were standardized all over the country. Policies sold in South Dakota are identical to policies sold in California and Florida (though there are some differences in a handful of states, including Minnesota).

### Pre-1992 Policies

Many South Dakota seniors still have Medigap policies they bought before 1992. If you have one of these, compare the benefits and premiums with the standard plans in this Guide to see if it makes sense for you to swap the old policy for a standard one. *See tips on page 14 & use the list inside the back cover.*

### A through J

Every company must label the standard plans with the same letters from A through J. Companies can, however, add their own policy names to the letter labels.

### Plans at a Glance

This chart shows the benefits that are included in each plan. There is more detail on the following pages. Companies must use the chart on the back cover of this book to show these benefits.

Core Benefits	Standard Plans									
	A	B	C	D	E	F	G	H	I	J
Part A Hospital. _____	X	X	X	X	X	X	X	X	X	X
Days 61-90 _____	X	X	X	X	X	X	X	X	X	X
Lifetime Reserve Days (91-150) _____	X	X	X	X	X	X	X	X	X	X
Blood _____	X	X	X	X	X	X	X	X	X	X
Part B Coinsurance (20%) _____	X	X	X	X	X	X	X	X	X	X
Additional Benefits										
Skilled Nursing Coinsurance (Days 21-100) _____			X	X	X	X	X	X	X	X
Part A Deductible _____		X	X	X	X	X	X	X	X	X
Part B Deductible _____			X			X				X
Part B Excess Charges _____						100%	80%		100%	100%
Foreign Travel Emergency _____			X	X	X	X	X	X	X	X
At-Home Recovery _____				X			X		X	X
Prescription Drugs (co-payments & limits) _____								X	X	X
Preventive Medical Care _____					X					X

- "X" means the plan provides the benefit.
- "A" is the only plan that Medigap companies **MUST** sell.
- Plans F & J can be sold with a policy deductible. The deductible will increase with inflation. It is \$1,690 in 2004.

*More Details on each benefit are on page 6.*



## Basic MediGap Benefits

### Medigap Plan A

All Medigap plans (A thru J) include a set of “Basic Benefits”

These are the **only** benefits in Plan A. Each of the other plans adds other benefits to the basics.

Plan A should always be a company’s lowest priced plan.

## Medicare Part A

- All Medicare-eligible hospital expenses except the Part A deductible
- An additional 365 days hospital coverage after all Medicare benefits have stopped
- First three pints of blood each year (Medicare pays all blood expenses after that)

## Medicare Part B

- Coinsurance (20% of approved charges) both in and out of hospital.
- You are responsible for the annual deductible.

## Your Responsibilities Under Plan A

On the next page we have shown the expenses you would still have to pay if you bought Medigap Plan A.

This Page Shows What's  
Left for You to Pay IF

- You have Medigap Plan A; &
- Your doctors & other providers accept Medicare assignment

Medical Item	Your Payment Responsibility
<b>Covered Medical Expenses:</b>	----- \$100 annual deductible
<b>Hospital</b>	
Deductible	----- \$876 (per benefit period)
At least 540 days in hospital	----- \$0
<b>Blood</b>	----- \$0
<b>Skilled Nursing Facility</b> (after 3-day hospital stay)	
1st 20 days	----- \$0
Days 21-100	----- \$109.50 per day
After 100 days	----- All expenses
<b>Medicare-approved home health care</b>	----- \$0
<b>Durable medical equipment</b>	----- \$0
<b>Preventive Care &amp; Testing</b>	
Vaccinations (flu, pneumonia, hepatitis B)	----- \$0
Diabetes monitoring (glucose monitor, test strips, lancets, training)	----- \$0
Colorectal Cancer Screening	----- \$0
Mammogram (over age 40)	----- \$0
Pap smear & pelvic exam (every 3 years unless high risk)	----- \$0
Prostate cancer screening	----- \$0
Other tests; physical exam	----- All expenses
<b>Foreign travel emergencies</b>	----- All expenses
<b>Drugs</b> (Outpatient prescription & over-the counter)	All expenses
<b>Vision, dental, hearing</b>	----- All expenses
<b>Procedures not approved by Medicare</b>	----- All Expenses

- Plan A is called the “Basic” Medigap Plan. All of the other plans start with “A” and add more benefits. “A” should always be a company’s cheapest plan.
- “A” is the only plan companies **MUST** sell. Only a few companies sell all 10 plans.

# Medigap Shopping List

## Adding Benefits to the Basics

Medigap Plans B thru J include all of the Basic Benefits in Plan A.  
Each has a different combination of the following 8 benefits.

You can shop for price and service, because the plans are identical between companies.

### Part A Deductible

Pays \$876 per benefit period. **Plans B thru J**

### Part B Deductible

Pays \$100 per calendar year. **Plans C, F, & J**

### Skilled Nursing Care

These Medigap policies will pay your daily coinsurance (\$109.50) for days 21 to 100. They will pay nothing after the 100th day in a benefit period.

**Plans C thru J**

### Excess Charges Under Part B

- You have these expenses only if your doctor does not take assignment.
- These plans will pay either 80% (Plan G) or 100% (Plans F, I, & J) of the amount the doctor can legally add to the Medicare approved charge. **Plans F, G, I, & J**

### At-home Recovery

- This pays up to \$1,600 per year to help you at home with “activities of daily living” while you recover from an illness.
- Medigap will pay this benefit only when you have qualified for Medicare home health care.

**Plans D, G, I, & J.**

### No Medigap Deductible

Except for the drug and emergency travel benefits, the original 10 Medigap plans have no deductibles or co-payments.

### Foreign Travel Emergency

Emergency care when you travel outside the U.S. This benefit has a \$250 deductible; the policies pay 80% of expenses, up to \$50,000 lifetime limit. **Plans C thru J**

### Preventive Care

This benefit pays for physical exam, cancer screenings, that are not covered by Medicare. The annual limit is \$120. **Plans E & J**

### Prescription Drugs

These plans pay part of the cost of outpatient prescription drugs. You must first pay an annual deductible of \$250. The plans will then pay 50% of each prescription’s cost.

**Basic Drugs:** \$1,250 annual limit.

**Plans H & I**

**Extended Drugs:** \$3,000 annual limit.

**Plan J**

### High Deductible Option F & J

- Plans F & J **can** be sold with a deductible. The deductible increases to keep up with inflation. In 2004 it is \$1,690.
- With the deductible, Plans F & J will pay nothing until you have paid the first \$1,650.
- This reduces the premium for those plans.

### Use the Medigap Shopping Chart

Every company must use the same chart to show you the benefits of each plan. The chart is on the back cover of this book.

- ☒ Pick the plan that meets your needs.
- ☒ Shop for price & service.

# Medicare Select

## Standard Medigap Plans **but** With Network Restrictions

### Standard Medigap Plans

Medicare Select policies have the same benefits as the ten standard Medigap plans (plans A thru J).

The only difference is that the Medicare Select policies have “network” restrictions like an HMO. That means you receive the Medigap benefits only when you use providers that belong to the plan’s network.

Medicare Select has been available in some states since 1995 and in South Dakota since 1998.

### Avera Select & Sioux Valley

Avera Select and Sioux Valley are the only companies with Medicare Select in South Dakota.

- Each company requires you to use specific hospitals in its “network.”
- If you use a “network” hospital, the Select plan will pay all hospital expenses (if you have Plan A, you will still have pay the deductible).
- If you go to “non-network” hospital, Medicare will still pay its share of the hospital expenses, but the Select policy will pay nothing **unless** it is an emergency.
- If an emergency requires you to use a non-network hospital, the Select policy will pay.
- Neither company has any restrictions on your choice of physician outside the hospital.
- Outside the hospital, Avera and Sioux Valley Select will pay Part B medical expenses, no matter what doctor you use.

### What is the advantage of a Medicare Select policy?

In exchange for accepting the network restrictions, you should pay a lower premium.

Under Medicare Select policies, insurers have a form of managed care, using the network restrictions to keep down both premiums and overall expenses.

### Plans A, B, C, & F

Although all of the ten Medigap plans **can** be sold as Medicare Select, Avera Select has chosen to sell only Plans A, B, C, & F. Sioux Valley sells Plans A, C, & F.

### Sample Monthly Premiums

#### Age 65

Plan	A	C	F
Avera .....	\$63 .....	\$74 .....	\$79
Sioux Valley ...	\$ 59 .....	\$70 .....	\$70

#### Age 70

Plan	A	C	F
Avera .....	\$73 .....	\$95 .....	\$101
Sioux Valley ...	\$ 69 .....	\$90 .....	\$90

Premiums for all Select plans are included in the premium section.

### Right to Switch

After you have had a Medicare Select policy for at least six months, you have the right to switch to a regular Medigap policy offered by the same company. You can make that switch even if you have bad health.

## Medicare Select Locations

### Avera Select

#### You must live in one of these counties

Aurora	Douglas	McPherson
Beadle	Edmunds	Miner
Bon Homme	Faulk	Minnehaha
Brookings	Grant	Moody
Brown	Gregory	Potter
Brule	Hand	Sanborn
Buffalo	Hanson	Spink
Campbell	Hutchinson	Sully
Charles Mix	Hyde	Tripp
Clark	Jerauld	Turner
Clay	Kingsbury	Union
Corson	Lake	Walworth
Davison	Lincoln	Yankton
Day	Marshall	
Dewey	McCook	

#### Avera Select Network Hospitals

Aberdeen .....	Avera St. Luke's Hospital
Bowdle .....	Bowdle Hospital
Britton .....	Marshall County Healthcare Ctr.
Burke .....	Community Memorial Hospital
Dell Rapids .....	Dells Area Health Ctr.
Eureka .....	Eureka Com. Health Services
Flandreau .....	Flandreau Medical Ctr.
Freeman .....	Freeman Community Hospital
Gettysburg .....	Gettysburg Medical Ctr.
Gregory .....	Avera Gregory Healthcare Ctr.
Madison .....	Madison Community Hospital
Milbank .....	Milbank Area Hospital
Miller .....	Hand County Memorial Hospital
Mitchell .....	Avera Queen of Peace
Mobridge .....	Mobridge Regional Hospital
Parkston .....	Avera St. Benedict Health Ctr.
Platte .....	Platte Health Center/Avera Health
Redfield .....	Community Memorial Hospital
Scotland .....	Landmann-Jungman Memorial
Sioux Falls .....	Avera McKennan Hospital
Sioux Falls .....	Heart Hospital of South Dakota
Tyndall .....	St. Michael's Hospital
Wagner .....	Wagner Community Memorial
Wessington Springs.....	Avera Weskota Memorial

### Sioux Valley Select

#### You must live in one of these counties

Aurora	Douglas	McCook
Beadle	Grant	Miner
Bon Homme	Gregory	Minnehaha
Brookings	Hamlin	Moody
Brule	Hanson	Roberts
Buffalo	Hutchinson	Sanborn
Charles Mix	Jerauld	Tripp
Clay	Kingsbury	Turner
Davison	Lake	Union
Day	Lincoln	Yankton
Deuel	Lyman	

#### Sioux Valley Select Network Hospitals

Burke .....	Community Memorial Hospital
Canton .....	Canton-Inwood Memorial
Chamberlain .....	Mid-Dakota Hospital
Clear Lake .....	Deuel County Memorial
Luverne (MN) .....	Luverne Community Hospital
Ortonville (MN) .....	Ortonville Area Health Services
Sioux Falls .....	S. Valley Hospital USD Medical
Vermillion .....	Sioux Valley Vermillion Hospital
Viborg .....	Pioneer Memorial Hospital
Watertown .....	Mallard Pointe Surgical Center
Webster .....	Lake Area Hospital
Winner .....	Winner Regional HealthCare
Yankton .....	Lewis & Clark Specialty Hospital

#### For More Information

**Avera Select: 1-888-605-3229**

[www.averaselect.com](http://www.averaselect.com)

**Sioux Valley: 1-888-605-9277**

[www.siouxvalley.org](http://www.siouxvalley.org)

# How Medigap Policies Can Differ: Things to Shop For

## Premiums & Age

Most insurance companies base their premiums (prices) on your age. As age goes up, so do the prices.

The companies expect that you will generally have lower medical bills at 65 than when you are 85 or 90.

### Attained Age

If you buy from a company that uses “attained age” rating, your premiums will increase as you get older. If you buy at 65, when you’re 70, you’ll pay the premiums charged new applicants who are 70.

Most companies use this method.

### Issue Age

If you buy an “issue age” policy, you’ll always pay based on the age you were when you bought the policy. If you buy at 65, you’ll still be paying the “age 65” premium when you are 90.

Your premiums will increase only when the company raises the price it charges all people who bought at your “issue age.”

## Premiums & Sex

Some companies have different premiums for women and men. They expect men to have higher health care bills.

## Premiums & Tobacco

Some companies charge higher prices to smokers. Being “smoke-free” for 1-2 years may qualify you for non-smoker prices.

## Pre-Existing Waiting Period

Medigap policies can make you wait up to 6 months before they will pay for treating a condition that you had in the 6 months before you bought the policy.

Although the law allows a 6-month waiting period, many companies have no waiting period, and most require less than 6 months.

Companies cannot impose a waiting period if you had other health insurance within the previous 6 months.

## Features Shared by All Policies

- ☑ Reviewed & approved by the South Dakota Insurance Division.
- ☑ Guaranteed renewable--the company cannot cancel your policy as long as you pay the premiums.
- ☑ 30-day free look--you can change your mind & get a refund within 30 days of receiving the policy.
- ☑ Identical benefits from company to company. One company’s Plan C is identical to every other company’s Plan C.

## Medicare Crossover

Federal law requires all doctors to file claims directly with Medicare. What happens next depends on your doctor and your insurance company.

### Medigap with Crossover Contract

If your Medigap company has a **crossover contract** with Medicare, the company sends Medicare a computer list of all of its members.

- When Medicare gets a claim from your doctor, Medicare automatically sends it to the Medigap company to pay your share of the bill.
- With crossover, this happens even if your doctor does not participate in Medicare.

### Medigap without Crossover Contract

If your Medigap company does not have a crossover contract, Medicare will pay the doctor, then send a statement to you.

It’s then up to you to send the statement (called a Medicare Summary Notice or MSN) to your Medigap company for payment of the balance unless you use a participating provider that has included your Medigap policy information on the Medicare claim form.

***Check with your providers to see if they will submit your secondary claim.***



# Medigap Open Enrollment

- During Medigap open enrollment no insurance company can reject your application because of your age or health problems.
- This is **not** the same as the Medicare open enrollment.

## Open Enrollment Period

- Starts on the first day of the first month that you enroll in Medicare Part B
- Open enrollment lasts for only 6 months.

During open enrollment, insurance companies must accept you for any of the 10 Medigap plans they sell, with no questions asked about your health.

## Pre-Ex Wait

Once you are accepted, the company can require you to wait as long as six months before it will pay for treatment of a pre-existing condition (“pre-ex”).

A pre-existing condition is any medical condition which was diagnosed or treated within the six months before the policy starts.

## Pre-Ex Exception

You do not have to wait for coverage of a pre-existing condition **if** you are at least 65 years old and have had continuous coverage by another health plan for the full six months before you enrolled in the Medigap plan. This is called **creditable coverage**.”

Your pre-ex waiting period is reduced by one month for every month that you were covered by the former plan.

## Disabled?

### You're Eligible in South Dakota !

If you are under 65 & disabled, you also have an open enrollment period for Medigap. Your open enrollment period starts when you enroll in Medicare and lasts for six months.

During the six month open enrollment period, you can apply for **any** Medigap policy that a company sells.

You can't be turned down.

There was no open enrollment in South Dakota for disabled Medicare recipients before 10/1/99

## Price Limits for Disabled

During open enrollment, no insurance company may charge any disabled recipient more than the company would normally charge a person who is 75 years old.

## After Open Enrollment

After your open enrollment period has ended, you no longer have a **guaranteed right** to buy a Medigap policy. It may be harder to find a company that will accept you.

If you have bad health, the insurance company can charge you higher rates or reject your application completely.

If you are disabled and under 65, most companies do not even have a policy you can apply for after open enrollment.

# After Open Enrollment Health Underwriting

## Health Questions

- After your Medigap open enrollment period has passed, insurance companies can reject your application because of your health.
- This is called “health underwriting.”

## Health Underwriting

Each company has its own health standards.

- You will be asked questions about your health and, perhaps, such habits as smoking.
- If you “pass,” the company will approve your application.
- If you “fail,” the company may either reject your application or charge higher premiums.

## Smokers

A few companies have a special (higher) rates for persons who smoke.

- The “smoker” premium will always be higher than the company’s premium for non-smokers.
- Companies vary on how long you must have been “smoke-free” to qualify for nonsmoker premiums.

## AARP: Almost Guaranteed Issue

A company with a “guaranteed issue” policy promises to sell the policy to anyone, regardless of health conditions.

United HealthCare’s AARP policy is **almost** guaranteed issue.

- During the first three years after you turn 65 and become eligible for Part B Medicare, Plans A-G are guaranteed issue. Anyone can buy them, with no health questions asked. This is like a 3-year open enrollment period.
- **After** your first three years in Medicare, United HealthCare does ask health questions. Your responses will determine how much you pay. AARP has two sets of premiums after your first three years in Medicare:
  - People who meet the company’s health standards. Lower premiums for Plans A-J.
  - People who do not meet the health standards. Higher premiums. Only Plans A-G.
- AARP **does** have health standards for Plans H-J after open enrollment.

End stage renal disease is the only health condition that will cause United HealthCare to turn you down completely.

## No Health Screening

A Medicare + Choice (PFFS) plan cannot turn you down because of bad health **unless** you have permanent kidney failure.

*See pages 25-26*

## All Other Companies : Pass / Fail

All of the other companies priced in this book have “pass / fail” underwriting for all plans after open enrollment.

- If you meet their health standards, you will be offered a policy.
- If you don’t meet the company’s standards, your application will be rejected.

## Medicare & Under 65?

### Receiving Medicare Because of a Disability

If you have a disability, you may qualify for Medicare before you turn 65.

Your Medicare benefits are the same as the benefits for people who qualify because of their age.

That means your benefits have the same gaps, and you have the same need to fill them as people 65 and older.

### Medicare + Choice: Guaranteed Right to Coverage

A “Medicare Plus Choice” plan must accept your application, without regard to your health.

**Turn to pages 25-26 for information about the Plans sold by Humana & Sterling.**

### Extra Protection in South Dakota !

South Dakota is one of only a few states that require companies to hold Medigap open enrollment for persons under 65 with disabilities.

- This law took effect in 1999.
- If it has been more than 6 months since you enrolled in Medicare, you will **not** have open enrollment until you turn 65!

### Open Enrollment for Medigap

Under South Dakota law, insurance companies must offer Medigap policies to certain disabled persons.

- In South Dakota you have a **guaranteed right** to buy a Medigap policy during the first 6 months after you become eligible for Medicare. This is the “open enrollment period” (see page 9).
- During open enrollment you have a right to buy the same policies that are sold to people over 65.
- That means during open enrollment you can buy any of the policies shown in this book at the premium shown for “Under 65.”
- You can’t be turned down because of your health...**but** you **can** be turned down if you don’t meet other membership requirements (for example, you must belong to the AARP to buy an AARP policy).

Your price during open enrollment cannot be more than the the company charges people who are age 75.

### After Open Enrollment

If it is already more than six months since you became eligible for Medicare, you do **not** have a right to buy **any** Medigap policy until you turn 65.

Only a few companies sell policies for disabled persons, and no company sells any of the plans that cover drugs.

Even if they do sell to the disabled, after open enrollment companies may turn you down because of your health--or because of the condition that makes you disabled.

## Answers to Some Questions About Medigap

### ***Do I save money with a plan that pays the Part B deductible (Plans C, F, J)?***

Probably not much. What you buy is convenience.

The Part B deductible is \$100 per year.

Adding Part B deductible to your coverage adds about \$100 to the price. You're just paying the \$100 to the insurance company so the insurance company can pass that payment along to your doctor the first time you visit the doctor.

### ***How important is the "excess charges" coverage in Plans F & G?***

It depends on what doctors you use.

If your doctor "accepts assignment", that means the doctor will not charge you any more than Medicare approves. There will be no excess charge and no use for the excess charge insurance benefit.

Many South Dakota doctors do not accept assignment.

If your doctor does not accept assignment, the doctor can charge 15% more than the Medicare approved charge. That is the "excess charge." The benefit in plans F & G would pay that amount.

### ***I never leave the country. Am I wasting money if I buy a plan with coverage for foreign travel emergencies ? (Plans C thru J)***

Yes, but not very much. Because so few people actually use this benefit, it does not add much to the policy price. Disregard it and focus on the other benefits.

### ***Can an insurance company reject my application for a Medigap policy because of my bad health?***

Yes. Unless you apply during the open enrollment period, which lasts 6 months after you have turned 65 **and** joined Medicare.

### ***Can the company cancel my policy if I have a lot of claims?***

No. Health insurance policies are guaranteed renewable. All you have to do is continue paying the premiums.

### ***How often can the company increase the monthly premium?***

As often as it proves to the State Division of Insurance that the increase is needed to cover rising expenses

### ***How does the drug benefit in Plans H, I, & J work?***

Each year you pay the first \$250 for drugs. That's the deductible.

After you've paid \$250, you then pay 50% (half) of the cost of each prescription. The insurance company will pay the other half.

The benefit stops each year after the company has paid its limit (\$1,250 for H&I; \$3,000 for J).

### ***What can I do if the insurance company rejects my application because of poor health?***

Make sure you're not still in the open enrollment period. If so, the company made a mistake and must let you enroll.

- Try other companies. Each company has its own standards.
- Consider the United HealthCare (AARP) policy. You may pay a higher premium, but the policy will be issued unless you have permanent kidney failure.
- You can join the Humana or Sterling PFFS. A PFFS plans cannot discriminate on the basis of health (except for kidney failure).

**See pages 15-16**

### ***The Most Popular Medigap Plans in South Dakota?***

- **Plans C & F**

Other Questions?

Call SHIINE

1-800-536-8197

# Medigap Shopping Tips

## Don't...

- ☐ **Don't buy** a Medigap policy if you are already receiving Medicaid.
- ☐ **Don't buy** a Medigap policy if your income is low enough to be a **Qualified Medicare Beneficiary**.
  - **Check the income limits on page 4 and call your local Department of Social Services if you think you may be eligible.**
- ☐ **Don't waste** your money on duplicate Medigap policies.
 

One Medigap is enough.  
Two are one too many!
- ☐ **Don't pay** the insurance agent with cash!
  - Make your check payable to the insurance company, **not** the insurance agent!
- ☐ **Don't treat** the premiums printed in this book as gospel!
  - The company may have changed its rates since the book was printed.
  - We may have made a mistake!
- ☐ **Don't fall** for sales hype.
  - The plans must all be labelled with the same letters (A,B,C, etc.).
  - Companies, may, however, add their own names to the plans.
  - The benefits in each company's plans are absolutely identical to the benefits in every other company's plans.
- ☐ **Don't respond** to mail or phone calls that promise to give you "important information about Medicare" but say nothing about insurance.
  - Unscrupulous insurance agents sometimes use this illegal trick to get into your living room (and your pocket!).

## Do...

- ☐ **Do your** homework!
  - Read the outline of coverage for a better understanding of all of the benefits.
  - Ask lots of questions.
  - Call SHIINE: **1-800-536-8197**
- ☐ **Do assume** the premiums will go up.
  - The company cannot single you out for a price hike, but it **can** (and will!) raise rates for all customers whenever it is not making enough money.
  - The company has to make a profit. If it has miscalculated and set today's rates too low, you could be hit big price hikes in the future.
- ☐ **Do use** the 10-plan chart on the back of this book
  - Select the plan that most closely meets your needs.
- ☐ **Do take** advantage of open enrollment.
  - Your best buy is generally during open enrollment.
  - During the first six months after you start Medicare, the company must accept you for any policy it sells without health questions.
- ☐ **Do read** your policy as soon as you receive it!
  - make sure you got what you ordered and that you still want it!!!
  - Your free look period lasts for only 30 days.

### Read Your Buyer's Guide

Every Medigap company must give prospective customers a copy of

#### **2004 Guide to Health Insurance for People with Medicare.**

The company may print its name on the cover.  
**But** it is written by Medicare.



# Medigap Replacement

Already have a Medigap policy?  
Shopping for a replacement?  
This page is for you!

## Good Reasons to Consider Replacement

- Premiums on your present policy have risen too much.
- You want to add benefits.
- You are dissatisfied with your present company's service.

## Bad Reason to Consider Replacement

Slick sales pitch by an insurance agent !

## Pre-1992 Policy

If you bought a Medigap before 1992, it may not look much like the standard policies sold today.

Pre-1992 policies sometimes included benefits that you cannot buy today. And because the policies are guaranteed renewable, you may still have those benefits. These include:

- Skilled nursing care after 100 days
- Private hospital room
- Private duty nursing
- Coverage for prescription drugs after hospitalization.
- Any other benefit you find in your present policy that is not on the standard plan chart on the back cover of this book.

## Swapper's Worksheet

Use the worksheet on the inside back of this book.

Don't swap policies until you have carefully compared what you have with what you think you are getting.

## Bad Health?

If you have bad health, switching may not be a realistic choice.

The company will ask health questions and may reject your application. *See page 20.*

## Pre-Ex Credit

If you have had your present policy for at least 6 months, you will not have to wait for the new policy to cover pre-existing conditions.

If you've had it for less than 6 months, you probably should not be swapping.

## But if you do switch....

You will get "credit" for the time you had the first policy. The total pre-ex waiting period for the two policies will not exceed six months.

## Replace...Don't Duplicate!

You do **not** need more than one Medigap policy!

Insurance agents are not allowed to sell you a Medigap that would result in duplicate coverage.

The agent should have you sign a statement that you intend to cancel the present policy.

## If you switch....

Keep making payments on the old policy until you've actually received and reviewed the new one...and are sure you want it!

## 30-day Free Look

When you receive a Medigap policy, you have 30 days to look it over, change your mind, and get a full refund.



# Medicare + Choice Private Fee For Service Plan (PFFS)

## What is a Private Fee For Service Plan (PFFS)?

A PFFS is a Medicare health plan sold by a private insurance company. Humana and Sterling Life Insurance Company are the only companies now authorized to sell PFFS plans in South Dakota.

### How the Plan is Paid

- You continue to pay Part B premiums to Medicare.
- Medicare pays the Plan a fixed amount every month to provide benefits to you.
- You pay a monthly premium.

### Features of PFFS Plans

- No network restrictions. You visit the Medicare-eligible doctor or hospital of your choice.
- You must use providers who agree to accept the PFFS's terms, conditions, and rate of payment.

### What's Covered by PFFS

- Covers all Medicare Part A and Part B services.
- Hospital coverage: 365 days per year.
- See comparison chart on the next page.

### New in 2000

PFFS plans are just getting started.

- Sterling & Humana have one-year, renewable contracts with Medicare.
- If the Plan does not renew the contract (or you join and decide you don't like it) you will still have Medicare coverage.
- If you dropped a Medigap policy to sign up for PFFS, you may have the right to get the policy back without having to pass health standards.

### Counties Where Humana is Available

Aurora, Beadle, Bon Homme, Charles Mix, Clark, Clay, Codington, Davison, Deuel, Douglas, Grant, Hamline, Hanson, Hutchinson, Jerauld, Kingsbury, Lake, Lincoln, Marshall, McCook, Miner, Minnehaha, Moody, Roberts, Sanborn, Turner, Union, and Yankton.

### Your Costs Under a PFFS Plan

- You continue to pay Part B premium to Medicare (\$66.60 in 2004).
- You pay the PFFS premium.
- You pay for other items depending on the plan's schedule. Some these costs are shown in the comparison chart on the next page.

### Continuous Medicare Coverage

No matter how you get your Medicare benefits, you are still in Medicare.

- You pay nothing extra for Part A.
- Monthly Part B premium (\$66.60) is deducted from your Social Security, Railroad Retirement, or Civil Service Retirement check.
- You are entitled to all services covered by Medicare.

### Limited Right to Return

If you quit a Medicare + Choice plan (*HMO or PFFS*) & return to "original" Medicare, you have some limited rights to enroll in a Medigap plan without health restrictions.

- Return to a Medigap plan you dropped in order to join a Medicare HMO or Private Fee-For-Service plan;
- If your former company is no longer selling that plan, you have the right to buy Plans **A, B, C,** or **F** from any company that sells in South Dakota.
- No health restrictions or extra charges because of your health
- Coverage for all pre-existing conditions
- You must apply for the Medigap policy within 63 days after leaving the Medicare + Choice plan.

## PFFS Comparison

This chart shows how much **you pay** for premiums and services under each of the PFFS plans. This is not a complete list. Each company has its own chart that compares its benefits to benefits under Medicare.

Neither plan limits your choice of doctor or hospital. **But** you must make sure your choice is willing to accept payment from the PFFS. If your provider refuses to accept PFFS payment, you will have to pay out of your pocket.

The benefits below assume that the medical service (except prescription drugs) is Medicare-approved.

Premium	Humana Gold Choice 1-800-222-0054	Sterling Option 1 1-888-858-8572
Monthly .....	\$29 .....	\$98 .....
Annual .....	\$348 .....	\$1,176 .....
Where Available .....	27 Counties .....	Statewide .....
Office Visits		
Primary Care .....	\$15 .....	\$15 .....
Specialist .....	\$30 .....	\$30 .....
Emergency Room .....	\$50 .....	\$50 (waived if admitted) .....
Inpatient Hospital		
First 5 days .....	\$165 per day .....	\$100 per day .....
Days 6-90 .....	\$0 .....	\$0 .....
Outpatient		
Urgent Care .....	\$25-\$50 .....	\$0 .....
Hospital Outpatient Center .....	\$50 .....	\$0 .....
Mental Health .....	\$30 .....	50% of cost .....
Ambulance .....	\$115 .....	\$100 .....
Durable Medical Equipment .....	30% of cost .....	50% of cost .....
Diabetic Test Supplies .....	20% of cost .....	40% of cost .....
Home Health .....	\$0 .....	35% of cost .....
Skilled Nursing Facility		
First 20 Days .....	\$0 .....	\$25 .....
Days 21-100 .....	\$75 .....	\$25 .....
Prescription Drugs		
Generic .....	\$12 (30 days) .....	100% (no benefit) .....
Generic Mail Order .....	\$36 (90 days) .....	
Brand Name .....	Cost minus \$10 .....	100% (no benefit) .....
Foreign Travel Emergency .....	\$250 + 20% .....	\$250 + 20% .....
Out of Pocket Limit .....	\$5,000 .....	No Limit .....

(not including drugs, diabetic supplies, expenses outside USA)



# 3

## 2004 Medigap Premiums

This section includes prices for all of the Medigap policies sold by 25 different companies in South Dakota.

Over 30 companies are approved to sell Medicare supplement insurance in South Dakota.

Every year SHIINE asks the companies about the policies that they sell. The companies provide premiums and other information.

SHIINE obtained the information on the following pages in March, 2004. Prices will change. Companies can request a premium increase at any time, but all increases must be approved by the South Dakota Division of Insurance.



- The premium information on the following pages will help you shop for Medigap insurance.
- SHIINE has tried to verify all of the figures.

### But

- The prices an insurance agent quotes you may differ from the prices you see here.
- The company may have had a rate increase since we collected the information in March, 2004.
- The premiums shown here may **not** include some small charges (such as a one-time application or membership fee).
- We **might** have made a mistake!

# Key to Medigap Premium Comparisons

## How to Read & Use the Comparisons

### Age Basis

**Attained Age:** Your premiums will go up each year to match the premium that the company charges new customers at your new age.

**Issue Age:** Your premium will always be based on the age you were when you bought the policy.

### Pre-Ex Wait

The number of months the company requires you to wait for coverage of a pre-existing condition is shown on the charts as “PreEx Wait: 6 mos.” (6 months), “PreEx Wait: 0 mos.” (no months), etc.

### Non-Smokers

Several companies charge higher prices if you are a smoker.

In addition to noting these companies (“nonsmoker”) on the comparison pages, we have shown a sample of their premiums for smokers on pages 41-42.

### Crossover

“Crossover” means that the company has a contract with Medicare to have your bills forwarded directly to the insurance company.

### Grouped by Age

To find the range of prices you would pay today, look at the age that is closest to yours. The comparison pages show premiums Disabled and at ages 65, 70, 75, 80, & 85.

### Sex

Most companies have the same prices for men and for women. However, a few charge more for men.

For those companies, we have shown both sets of prices, indicating whether they are for men or women.

### No Drug Coverage: Plans A thru G

The first set of premium comparisons includes only plans A through G. These plans do **not** include any prescription drug coverage.

### Prescription Drug Coverage: Plans H thru J

Only a few companies sell plans H, I, or J, which include some coverage for prescription drugs.

### Open Enrollment Period?

Remember: During your open enrollment period you have a guaranteed right to buy **any** of these policies, without regard to your health or disability.

After your open enrollment period, companies can reject your application (or charge you more) because of your health or disability.

**See page 10**

### Monthly Premium Converter

We have shown annual premiums.

Most of the companies permit payments as often as monthly. The monthly payment may be a little more than 1/12 of the annual cost.

#### Annual....Monthly

\$500 ..... \$42

\$700 ..... \$58

\$900 ..... \$75

\$1,100 ... \$92

#### Annual... Monthly

\$1,300 ... \$108

\$1,500 ... \$125

\$1,700 ... \$142

\$1,900 ... \$158

**All premiums have been  
rounded to the nearest dollar!**

# 2004 Medigap Premiums

As of March, 2004

Based on Buyer's Age

Each year SHIINE asks insurance companies to provide information about the Medicare Supplement policies they sell in South Dakota. More than 30 companies are licensed to sell Medigap in South Dakota. 23 companies provided information for this Guide in the spring of 2004.

The prices shown here may not be exactly what you will pay:

- Some companies have different prices for every age; we have shown the annual prices the company quoted for five different ages: Under 65, 65, 70, 75, and 80.
- Companies can change their prices whenever approved by the South Dakota Department of Insurance
- If you don't meet the company's health standards, the company may charge a higher price or turn you down completely...**unless** you buy during open enrollment.

**Plans A-G (No coverage for prescription drugs)**  
**Plans H-J (Covers drugs--with deductible & co-pay)**

## **Under 65 (Disabled) During Open Enrollment Only**

<b>Plans A-G:</b> .....	<b>30</b>
<b>Plans H-J</b> .....	<b>34</b>

## **Ages 65, 70-75, & 80**

<b>Plans A-G:</b> .....	<b>35</b>
<b>Plans H-J</b> .....	<b>51</b>

## **Price Shopper** ..... **55**

Annual premiums if bought at Age 65

Annual premiums arranged from lowest to highest

## **Company Directory**.....**61**

Directory of all companies that responded to SHIINE's 2004 survey

# Disabled & Under 65 During Open Enrollment

Annual Price: Must Buy Within First Six Months of Medicare Eligibility

**A** **B** **C** **D** **E** **F** **F deduct** **G**

**American Family Mutual**  
(888) 374-7121 *Attained Age*  
www.amfam.com

A	B	C	D	E	F	F Deduct	G
\$632					\$1,623		

*PreEx Wait: 0 mos*

*Crossover*

**Avera Select (Use Network Hospitals)**  
(888) 605-3229 *Issue Age*  
www.averaselect.com

A	B	C	D	E	F	F Deduct	G
\$906	\$1,006	\$1,265			\$1,354		

*PreEx Wait: 0 mos*

*Crossover*

*Medicare Select*

**Bankers Fidelity**  
(800) 241-1439 *Issue Age*  
www.bflc.com

A	B	C	D	E	F	F Deduct	G
\$624	\$1,080	\$1,325	\$1,346		\$1,472	\$907	

*PreEx Wait: 0 mos*

*Smokers pay more*

**Bankers Life**  
(800) 621-3724 *Attained Age*  
www.bankerslife.com

A	B	C	D	E	F	F Deduct	G
\$1,098	\$1,784	\$2,102	\$2,025	\$1,660	\$1,910	\$875	\$1,701

*PreEx Wait: 0 mos*

**Central States**  
(800) 541-2363 *Attained Age*  
www.cso.com

A	B	C	D	E	F	F Deduct	G
\$1,804	\$1,748	\$2,022	\$1,956		\$2,335		\$1,982

*PreEx Wait: 6 mos*

*Crossover*

*Smokers pay more*

**Combined Insurance**  
(800) 544-5531 *Issue Age*  
www.combinedinsurance.com

A	B	C	D	E	F	F Deduct	G
\$1,330	\$1,935	\$2,318	\$1,958		\$2,254	\$978	

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more (D&F)*

**Consitution Life (Men)**  
800-789-6364 *Attained Age*  
www.uaflc.com

A	B	C	D	E	F	F Deduct	G
\$1,051	\$1,386	\$1,618	\$1,460		\$1,670		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Consitution Life (Women)**  
800-789-6364 *Attained Age*  
www.uaflc.com

A	B	C	D	E	F	F Deduct	G
\$914	\$1,204	\$1,408	\$1,270		\$1,453		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Equitable Life**  
(800) 352-5170 *Attained Age*  
www.EquiLife.com

A	B	C	D	E	F	F Deduct	G
\$842	\$1,415	\$1,699	\$1,591	\$1,611	\$1,848	\$832	\$1,690

*PreEx Wait: 0 mos*

*Crossover*

During open enrollment you can buy any of these policies, regardless of your health.  
Premiums are the same as the company charges persons who are age 75 when they buy.  
Most companies don't sell to persons under 65 after open enrollment .



# Disabled & Under 65 During Open Enrollment

Annual Price: Must Buy Within First Six Months of Medicare Eligibility

**A** **B** **C** **D** **E** **F** **F Deduct** **G**

**Globe Life**  
*Attained Age*  
www.globeontheweb.com

A	B	C	D	E	F	F Deduct	G
\$824	\$1,306	\$1,551			\$1,557		

*PreEx Wait: 0 mos*

**Guarantee Trust**  
(800) 338-7452 *Attained Age*  
www.gtlic.com

A	B	C	D	E	F	F Deduct	G
\$1,113		\$2,180			\$2,201	\$628	\$1,997

*PreEx Wait: 0 mos*

**Mennonite Mutual Aid (Members of Mennonite Assoc.)**  
(574) 533-9515 *Issue Age*  
www.mma-online.org

A	B	C	D	E	F	F Deduct	G
\$880				\$1,347	\$1,546		

*PreEx Wait: mos.*

**Mutual of Omaha**  
(800) 316-0842 *Attained Age*

A	B	C	D	E	F	F Deduct	G
\$1,264		\$1,540	\$1,416		\$1,562		\$1,237

*PreEx Wait: 6 mos*

*Crossover*

*Smokers pay more*

**National States**  
(800) 868-6788 *Issue Age*

A	B	C	D	E	F	F Deduct	G
\$849	\$1,643	\$2,991			\$1,921		

*PreEx Wait: 0 mos*

**Pennsylvania Life (Zip codes 570-1; 573-7): Men**  
(800) 275-7366 *Attained Age*  
www.uafc.com

A	B	C	D	E	F	F Deduct	G
\$1,038	\$1,375	\$1,582	\$1,511		\$1,630		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Pennsylvania Life (Zip codes 570-1; 573-7): Women**  
(800) 275-7366 *Attained Age*  
www.uafc.com

A	B	C	D	E	F	F Deduct	G
\$941	\$1,246	\$1,432	\$1,369		\$1,477		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Pennsylvania Life: Men (Zip codes not listed above)**  
800-275-7366 *Attained Age*  
www.uafc.com

A	B	C	D	E	F	F Deduct	G
\$909	\$1,203	\$1,384	\$1,322		\$1,426		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

During open enrollment you can buy any of these policies, regardless of your health. Premiums are the same as the company charges persons who are age 75 when they buy. Most companies don't sell to persons under 65 after open enrollment .

## Disabled & Under 65 During Open Enrollment

Annual Price: Must Buy Within First Six Months of Medicare Eligibility

**A** **B** **C** **D** **E** **F** **F deduct** **G**

**Pennsylvania Life: Women (Zip codes not listed above)**

A	B	C	D	E	F	F Deduct	G
\$823	\$1,090	\$1,253	\$1,198		\$1,292		

800-275-7366 *Attained Age*  
www.uaafc.com

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Physicians Life**

A	B	C	D	E	F	F Deduct	G
\$1,007	\$1,244				\$1,634		\$1,417

(800) 228-9100 *Attained Age*  
www.physiciansmutual.com

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

**Pyramid Life**

A	B	C	D	E	F	F Deduct	G
\$1,658	\$1,624	\$2,138	\$1,625		\$2,089	\$559	\$1,728

(800) 777-1126 *Attained Age*  
www.pyramidlife.com

*PreEx Wait: 6 mos*

*Crossover*

**Sioux Valley**

A	B	C	D	E	F	F Deduct	G
\$865		\$1,571			\$1,737	\$782	

(888) 605-9277 *Attained Age*  
www.siouxvalley.org

*PreEx Wait: 0 mos*

*Crossover*

*Medicare Select*

**Sioux Valley Select (Use Network Hospitals)**

A	B	C	D	E	F	F Deduct	G
\$938		\$1,309			\$1,401		

(888) 605-9277 *Attained Age*  
www.siouxvalley.org

*PreEx Wait: 0 mos*

*Crossover*

*Medicare Select*

**Standard Life & Accident: Men (varies by zip code)**

A	B	C	D	E	F	F Deduct	G
\$1,625	\$2,038	\$2,344	\$1,538	\$1,454	\$2,358	\$649	\$1,339

(888) 350-1488 *Attained Age*  
www.slaico.com

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

**Standard Life & Accident: Women (varies by zip code)**

A	B	C	D	E	F	F Deduct	G
\$1,407	\$1,765	\$2,030	\$1,332	\$1,259	\$2,042	\$562	\$1,339

(888) 350-1488 *Attained Age*  
www.slaico.com

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

**State Farm Mutual (call local agent)**

A	B	C	D	E	F	F Deduct	G
\$1,105		\$1,666			\$1,916		

*Attained Age*

www.statefarm.com

*PreEx Wait: 0 mos*

*Crossover*

**Thrivent for Lutherans**

A	B	C	D	E	F	F Deduct	G
\$1,189		\$1,661	\$1,312		\$1,691		

(800) 847-4836 *Issue Age*  
www.thrivent.com

*PreEx Wait: 0 mos*

*Crossover*

During open enrollment you can buy any of these policies, regardless of your health. Premiums are the same as the company charges persons who are age 75 when they buy. Most companies don't sell to persons under 65 after open enrollment.

## Disabled & Under 65 During Open Enrollment

Annual Price: Must Buy Within First Six Months of Medicare Eligibility

**A** **B** **C** **D** **E** **F** **Fdeduct** **G**

United Health Care (AARP members)

A	B	C	D	E	F	F Deduct	G
\$799	\$1,383	\$1,610	\$1,492	\$1,492	\$1,673		\$1,528

(800) 523-5800 *Issue Age*  
www.aarphealthcare.com

*PreEx Wait: 3 mos*

*Crossover*

United Teachers: Men

A	B	C	D	E	F	F Deduct	G
\$1,310	\$1,324	\$1,837	\$1,533		\$1,844		\$1,539

*Attained Age*

*PreEx Wait: mos.*

*Smokers pay more*

United Teachers: Women

A	B	C	D	E	F	F Deduct	G
\$1,637	\$1,331	\$1,597	\$1,334		\$1,603		\$1,338

*Attained Age*

*PreEx Wait: mos.*

*Smokers pay more*

Wellmark Blue Cross

A	B	C	D	E	F	F Deduct	G
\$749		\$1,582		\$1,230	\$1,649		\$1,588

(800) 831-4818 *Attained Age*  
www.wellmark.com

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

SHINE asked companies to specify whether they sell to disabled persons after open enrollment.

Unfortunately, the results were confusing, so we have not identified any.

To be sure, call the company.

During open enrollment you can buy any of these policies, regardless of your health. Premiums are the same as the company charges persons who are age 75 when they buy. Most companies don't sell to persons under 65 after open enrollment .

## Disabled & Under 65 During Open Enrollment

Annual Price: Must Buy Within First Six Months of Medicare Eligibility

	H	I	J	Jdeduct
<b>Equitable Life</b>	H	I	J	J With Deductible
(800) 352-5170 <i>Attained Age</i> www.EquiLife.com	\$2,774	\$2,963	\$3,347	\$1,506
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	
<b>Pyramid Life</b>	H	I	J	J With Deductible
(800) 777-1126 <i>Attained Age</i> www.pyramidlife.com				\$1,306
	<i>PreEx Wait: 6 mos.</i>		<i>Crossover</i>	
<b>Sioux Valley</b>	H	I	J	J With Deductible
(888) 605-9277 <i>Attained Age</i> www.siouxvalley.org		\$3,189		
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	
				<i>Medicare Select</i>
<b>Thrivent for Lutherans</b>	H	I	J	J With Deductible
(800) 847-4836 <i>Issue Age</i> www.thrivent.com	\$2,491	\$2,841		
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	
<b>United Health Care (AARP members)</b>	H	I	J	J With Deductible
(800) 523-5800 <i>Issue Age</i> www.aarphealthcare.com	\$2,392	\$2,468	\$3,201	
	<i>PreEx Wait: 3 mos.</i>		<i>Crossover</i>	
<b>Wellmark Blue Cross</b>	H	I	J	J With Deductible
(800) 831-4818 <i>Attained Age</i> www.wellmark.com			\$4,310	
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	
				<i>Smokers pay more</i>

After Open Enrollment,  
No company sells Plan H, I, or J to Persons Under Age 65.

## Plans A-G No Drug benefits

### Annual Price when bought at Age 65

**American Family Mutual**  
(888) 374-7121 *Attained Age*  
www.amfam.com

A	B	C	D	E	F	F deduct	G
\$522					\$1,328		

*PreEx Wait: 0 mos*

*Crossover*

**Avera Select (Use Network Hospitals)**  
(888) 605-3229 *Issue Age*  
www.averaselect.com

A	B	C	D	E	F	F Deduct	G
\$751	\$828	\$888			\$948		

*PreEx Wait: 0 mos*

*Crossover*

*Medicare Select*

**Bankers Fidelity**  
(800) 241-1439 *Issue Age*  
www.bflic.com

A	B	C	D	E	F	F Deduct	G
\$558	\$893	\$1,066	\$1,116		\$1,296	\$778	

*PreEx Wait: 0 mos*

*Smokers pay more*

**Bankers Life**  
(800) 621-3724 *Attained Age*  
www.bankerslife.com

A	B	C	D	E	F	F Deduct	G
\$827	\$1,250	\$1,474	\$1,371	\$1,148	\$1,293	\$613	\$1,116

*PreEx Wait: 0 mos*

**Bankers Life (Retired SD state employees)**  
(800) 621-3724 *Attained Age*  
www.bankerslife.com

A	B	C	D	E	F	F Deduct	G
					\$1,005		

*PreEx Wait: 0 mos*

**Central States**  
(800) 541-2363 *Attained Age*  
www.cso.com

A	B	C	D	E	F	F Deduct	G
\$1,279	\$1,239	\$1,435	\$1,322		\$1,655		\$1,345

*PreEx Wait: 6 mos*

*Crossover*

*Smokers pay more*

**Combined Insurance**  
(800) 544-5531 *Issue Age*  
www.combinedinsurance.com

A	B	C	D	E	F	F Deduct	G
\$1,069	\$1,539	\$1,844	\$1,500		\$1,799	\$627	

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more (D&F)*

**Consitution Life (Men)**  
800-789-6364 *Attained Age*  
www.uafo.com

A	B	C	D	E	F	F Deduct	G
\$767	\$989	\$1,165	\$1,039		\$1,203		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Consitution Life (Women)**  
800-789-6364 *Attained Age*  
www.uafo.com

A	B	C	D	E	F	F Deduct	G
\$666	\$859	\$1,013	\$904		\$1,046		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

During open enrollment you can buy any of these policies, regardless of your health.  
Premiums are the same as the company charges persons who are age 75 when they buy.  
Most companies don't sell to persons under 65 after open enrollment .

## Plans A-G No Drug benefits

## Annual Price when bought at Age 65

	A	B	C	D	E	F	F deduct	G
<b>Equitable Life</b> (800) 352-5170 <i>Attained Age</i> www.EquiLife.com	\$637	\$1,038	\$1,196	\$1,080	\$1,125	\$1,297	\$585	\$1,158
	<i>PreEx Wait: 0 mos</i>			<i>Crossover</i>				
<b>Globe Life</b> <i>Attained Age</i> www.globeontheweb.com	\$583	\$910	\$1,071			\$1,078		
	<i>PreEx Wait: 0 mos</i>							
<b>Guarantee Trust</b> (800) 338-7452 <i>Attained Age</i> www.gtlic.com	\$822		\$1,620			\$1,627	\$464	\$1,484
	<i>PreEx Wait: 0 mos</i>							
<b>Medico Life</b>  www.mutprot.com	\$1,240		\$2,002			\$2,177		\$1,989
	<i>PreEx Wait: mos.</i>							
<b>Mennonite Mutual Aid (Members of Mennonite Assoc.)</b> (574) 533-9515 <i>Issue Age</i> www.mma-online.org	\$748				\$1,074	\$1,260		
	<i>PreEx Wait: mos.</i>							
<b>Mutual of Omaha</b> (800) 316-0842 <i>Attained Age</i>	\$917		\$1,116	\$1,027		\$1,133		\$897
	<i>PreEx Wait: 6 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		
<b>Mutual Protective</b>  www.mutprot.com	\$1,240		\$2,002			\$2,177		\$1,989
	<i>PreEx Wait: mos.</i>							
<b>National States</b> (800) 868-6788 <i>Issue Age</i>	\$728	\$1,414	\$2,573			\$1,653		
	<i>PreEx Wait: 0 mos</i>							
<b>Pennsylvania Life (Zip codes 570-1; 573-7): Women</b> (800) 275-7366 <i>Attained Age</i> www.uafc.com	\$686	\$890	\$1,049	\$974		\$1,082		
	<i>PreEx Wait: 3 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		
<b>Pennsylvania Life: Men (Zip codes not listed above)</b> 800-275-7366 <i>Attained Age</i> www.uafc.com	\$663	\$860	\$1,014	\$940		\$1,045		
	<i>PreEx Wait: 3 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		

During open enrollment you can buy any of these policies, regardless of your health.  
Premiums are the same as the company charges persons who are age 75 when they buy.  
Most companies don't sell to persons under 65 after open enrollment .



## Plans A-G No Drug benefits

## Annual Price when bought at Age 65

**Pennsylvania Life: Women (Zip codes not listed above)**

800-275-7366 *Attained Age*  
www.uafo.com

A	B	C	D	E	F	F Deduct	G
\$600	\$778	\$918	\$852		\$946		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Physicians Life**

(800) 228-9100 *Attained Age*  
www.physiciansmutual.com

A	B	C	D	E	F	F Deduct	G
\$763	\$943				\$1,190		\$1,030

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

**Pyramid Life**

(800) 777-1126 *Attained Age*  
www.pyramidlife.com

A	B	C	D	E	F	F Deduct	G
\$1,208	\$1,167	\$1,541	\$1,169		\$1,507	\$409	\$1,242

*PreEx Wait: 6 mos*

*Crossover*

**Reserve National**

www.reservenational.com

A	B	C	D	E	F	F Deduct	G
\$625	\$1,016	\$1,203			\$1,442		

*PreEx Wait: mos.*

**Sioux Valley**

(888) 605-9277 *Attained Age*  
www.siouxvalley.org

A	B	C	D	E	F	F Deduct	G
\$593		\$1,078			\$1,191	\$536	

*PreEx Wait: 0 mos*

*Crossover*

*Medicare Select*

**Sioux Valley Select (Use Network Hospitals)**

(888) 605-9277 *Attained Age*  
www.siouxvalley.org

A	B	C	D	E	F	F Deduct	G
\$777		\$920			\$913		

*PreEx Wait: 0 mos*

*Crossover*

*Medicare Select*

**Standard Life & Accident: Men (varies by zip code)**

(888) 350-1488 *Attained Age*  
www.slaico.com

A	B	C	D	E	F	F Deduct	G
\$1,341	\$1,681	\$1,934	\$1,269	\$1,199	\$1,946	\$535	\$1,139

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

**Standard Life & Accident: Women (varies by zip code)**

(888) 350-1488 *Attained Age*  
www.slaico.com

A	B	C	D	E	F	F Deduct	G
\$1,197	\$1,502	\$1,727	\$1,133	\$1,071	\$1,738	\$478	\$1,139

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

**State Farm Mutual (call local agent)**

*Attained Age*  
www.statefarm.com

A	B	C	D	E	F	F Deduct	G
\$737		\$1,111			\$1,277		

*PreEx Wait: 0 mos*

*Crossover*

During open enrollment you can buy any of these policies, regardless of your health. Premiums are the same as the company charges persons who are age 75 when they buy. Most companies don't sell to persons under 65 after open enrollment.

## Plans A-G No Drug benefits

### Annual Price when bought at Age 65

#### Thrivent for Lutherans

(800) 847-4836 *Issue Age*  
www.thrivent.com

A	B	C	D	E	F	F deduct	G
\$1,100		\$1,530	\$1,170		\$1,535		

*PreEx Wait: 0 mos*

*Crossover*

#### United American

(800) 331-2512  
www.unitedamerican.com

A	B	C	D	E	F	F Deduct	G
\$1,096	\$1,334	\$1,538	\$1,446		\$2,056	\$1,784	

*PreEx Wait: mos.*

#### United Health Care (AARP members)

(800) 523-5800 *Issue Age*  
www.aarphealthcare.com

A	B	C	D	E	F	F Deduct	G
\$581	\$1,006	\$1,171	\$1,085	\$1,085	\$1,217		\$1,111

*PreEx Wait: 3 mos*

*Crossover*

#### United Teachers: Men

*Attained Age*

A	B	C	D	E	F	F Deduct	G
\$978	\$1,114	\$1,341	\$1,115		\$1,346		\$1,119

*PreEx Wait: mos.*

*Smokers pay more*

#### United Teachers: Women

*Attained Age*

A	B	C	D	E	F	F Deduct	G
\$850	\$968	\$1,166	\$970		\$1,170		\$972

*PreEx Wait: mos.*

*Smokers pay more*

#### Wellmark Blue Cross

(800) 831-4818 *Attained Age*  
www.wellmark.com

A	B	C	D	E	F	F Deduct	G
\$515		\$1,072		\$893	\$1,117		\$1,091

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

During open enrollment you can buy any of these policies, regardless of your health.  
Premiums are the same as the company charges persons who are age 75 when they buy.  
Most companies don't sell to persons under 65 after open enrollment .

## Plans A-G No Drug benefits

### Annual Price when bought at Age 70

**American Family Mutual**  
(888) 374-7121 *Attained Age*  
www.amfam.com

A	B	C	D	E	F	F deduct	G
\$579					\$1,478		

*PreEx Wait: 0 mos*

*Crossover*

**Avera Select (Use Network Hospitals)**  
(888) 605-3229 *Issue Age*  
www.averaselect.com

A	B	C	D	E	F	F Deduct	G
\$871	\$962	\$1,139			\$1,217		

*PreEx Wait: 0 mos*

*Crossover*

*Medicare Select*

**Bankers Fidelity**  
(800) 241-1439 *Issue Age*  
www.bflic.com

A	B	C	D	E	F	F Deduct	G
\$605	\$979	\$1,152	\$1,225		\$1,397	\$838	

*PreEx Wait: 0 mos*

*Smokers pay more*

**Bankers Life**  
(800) 621-3724 *Attained Age*  
www.bankerslife.com

A	B	C	D	E	F	F Deduct	G
\$940	\$1,477	\$1,738	\$1,646	\$1,365	\$1,569	\$731	\$1,375

*PreEx Wait: 0 mos*

**Bankers Life (Retired SD state employees)**  
(800) 621-3724 *Attained Age*  
www.bankerslife.com

A	B	C	D	E	F	F Deduct	G
					\$1,220		

*PreEx Wait: 0 mos*

**Central States**  
(800) 541-2363 *Attained Age*  
www.cso.com

A	B	C	D	E	F	F Deduct	G
\$1,519	\$1,471	\$1,704	\$1,613		\$1,966		\$1,637

*PreEx Wait: 6 mos*

*Crossover*

*Smokers pay more*

**Combined Insurance**  
(800) 544-5531 *Issue Age*  
www.combinedinsurance.com

A	B	C	D	E	F	F Deduct	G
\$1,124	\$1,631	\$1,954	\$1,500		\$1,896	\$796	

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more (D&F)*

**Consitution Life (Men)**  
800-789-6364 *Attained Age*  
www.uafo.com

A	B	C	D	E	F	F Deduct	G
\$904	\$1,175	\$1,375	\$1,237		\$1,419		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Consitution Life (Women)**  
800-789-6364 *Attained Age*  
www.uafo.com

A	B	C	D	E	F	F Deduct	G
\$786	\$1,022	\$1,196	\$1,075		\$1,233		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

During open enrollment you can buy any of these policies, regardless of your health.  
Premiums are the same as the company charges persons who are age 75 when they buy.  
Most companies don't sell to persons under 65 after open enrollment .

## Plans A-G No Drug benefits

### Annual Price when bought at Age 70

	A	B	C	D	E	F	F deduct	G
<b>Equitable Life</b> (800) 352-5170 <i>Attained Age</i> www.EquiLife.com	\$754	\$1,238	\$1,446	\$1,324	\$1,370	\$1,570	\$707	\$1,415
	<i>PreEx Wait: 0 mos</i>			<i>Crossover</i>				
<b>Globe Life</b> <i>Attained Age</i> www.globeontheweb.com	\$776	\$1,195	\$1,356			\$1,363		
	<i>PreEx Wait: 0 mos</i>							
<b>Guarantee Trust</b> (800) 338-7452 <i>Attained Age</i> www.gtlic.com	\$968		\$1,901			\$1,916	\$547	\$1,743
	<i>PreEx Wait: 0 mos</i>							
<b>Medico Life</b>  www.mutprot.com	\$1,581		\$2,541			\$2,763		\$2,612
	<i>PreEx Wait: mos.</i>							
<b>Mennonite Mutual Aid (Members of Mennonite Assoc.)</b> (574) 533-9515 <i>Issue Age</i> www.mma-online.org	\$836				\$1,245	\$1,431		
	<i>PreEx Wait: mos.</i>							
<b>Mutual of Omaha</b> (800) 316-0842 <i>Attained Age</i>	\$1,086		\$1,324	\$1,217		\$1,343		\$1,063
	<i>PreEx Wait: 6 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		
<b>Mutual Protective</b>  www.mutprot.com	\$1,581		\$2,541			\$2,763		\$2,612
	<i>PreEx Wait: mos.</i>							
<b>National States</b> (800) 868-6788 <i>Issue Age</i>	\$815	\$1,576	\$2,871			\$1,845		
	<i>PreEx Wait: 0 mos</i>							
<b>Pennsylvania Life (Zip codes 570-1; 573-7): Men</b> (800) 275-7366 <i>Attained Age</i> www.uafc.com	\$892	\$1,167	\$1,356	\$1,278		\$1,398		
	<i>PreEx Wait: 3 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		
<b>Pennsylvania Life (Zip codes 570-1; 573-7): Women</b> (800) 275-7366 <i>Attained Age</i> www.uafc.com	\$808	\$1,057	\$1,229	\$1,158		\$1,266		
	<i>PreEx Wait: 3 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		

During open enrollment you can buy any of these policies, regardless of your health.  
Premiums are the same as the company charges persons who are age 75 when they buy.  
Most companies don't sell to persons under 65 after open enrollment .

## Plans A-G No Drug benefits

### Annual Price when bought at Age 70

**Pennsylvania Life: Men** (Zip codes not listed above)

800-275-7366 *Attained Age*  
www.uafo.com

A	B	C	D	E	F	F Deduct	G
\$780	\$1,021	\$1,186	\$1,119		\$1,224		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Pennsylvania Life: Women** (Zip codes not listed above)

800-275-7366 *Attained Age*  
www.uafo.com

A	B	C	D	E	F	F Deduct	G
\$707	\$925	\$1,075	\$1,014		\$1,108		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Physicians Life**

(800) 228-9100 *Attained Age*  
www.physiciansmutual.com

A	B	C	D	E	F	F Deduct	G
\$902	\$1,121				\$1,424		\$1,234

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

**Pyramid Life**

(800) 777-1126 *Attained Age*  
www.pyramidlife.com

A	B	C	D	E	F	F Deduct	G
\$1,507	\$1,454	\$1,922	\$1,455		\$1,880	\$464	\$1,546

*PreEx Wait: 6 mos*

*Crossover*

**Reserve National**

www.reservenational.com

A	B	C	D	E	F	F Deduct	G
\$726	\$1,163	\$1,422			\$1,694		

*PreEx Wait: mos.*

**Sioux Valley**

(888) 605-9277 *Attained Age*  
www.siouxvalley.org

A	B	C	D	E	F	F Deduct	G
\$707		\$1,284			\$1,419	\$639	

*PreEx Wait: 0 mos*

*Crossover*

*Medicare Select*

**Sioux Valley Select (Use Network Hospitals)**

(888) 605-9277 *Attained Age*  
www.siouxvalley.org

A	B	C	D	E	F	F Deduct	G
\$902		\$1,179			\$1,172		

*PreEx Wait: 0 mos*

*Crossover*

*Medicare Select*

**Standard Life & Accident: Men** (varies by zip code)

(888) 350-1488 *Attained Age*  
www.slaico.com

A	B	C	D	E	F	F Deduct	G
\$1,391	\$1,744	\$2,006	\$1,316	\$1,244	\$2,019	\$556	\$1,166

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

**Standard Life & Accident: Women** (varies by zip code)

(888) 350-1488 *Attained Age*  
www.slaico.com

A	B	C	D	E	F	F Deduct	G
\$1,225	\$1,536	\$1,768	\$1,160	\$1,096	\$1,778	\$489	\$1,166

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

During open enrollment you can buy any of these policies, regardless of your health.  
Premiums are the same as the company charges persons who are age 75 when they buy.  
Most companies don't sell to persons under 65 after open enrollment .

## Plans A-G No Drug benefits

## Annual Price when bought at Age 70

**State Farm Mutual (call local agent)**

*Attained Age*

[www.statefarm.com](http://www.statefarm.com)

A	B	C	D	E	F	F Deduct	G
\$921		\$1,388			\$1,597		

*PreEx Wait: 0 mos*

*Crossover*

**Thrivent for Lutherans**

(800) 847-4836 *Issue Age*

[www.thrivent.com](http://www.thrivent.com)

A	B	C	D	E	F	F Deduct	G
\$1,150		\$1,594	\$1,250		\$1,614		

*PreEx Wait: 0 mos*

*Crossover*

**United American**

(800) 331-2512

[www.unitedamerican.com](http://www.unitedamerican.com)

A	B	C	D	E	F	F Deduct	G
\$1,180	\$1,760	\$2,027	\$1,924		\$2,260	\$2,036	

*PreEx Wait: mos.*

**United Health Care (AARP members) Must meet health standards**

(800) 523-5800 *Issue Age*

[www.aarphealthcare.com](http://www.aarphealthcare.com)

A	B	C	D	E	F	F Deduct	G
\$799	\$1,383	\$1,610	\$1,492	\$1,492	\$1,673		\$1,528

*PreEx Wait: 3 mos*

*Crossover*

**United Health Care (AARP members) No health standards**

(800) 523-5800 *Issue Age*

[www.aarphealthcare.com](http://www.aarphealthcare.com)

A	B	C	D	E	F	F Deduct	G
\$1,089	\$1,885	\$2,196	\$2,034	\$2,034	\$2,281		\$2,083

*PreEx Wait: 3 mos*

*Crossover*

**United Teachers: Men**

*Attained Age*

A	B	C	D	E	F	F Deduct	G
\$1,108	\$1,104	\$1,531	\$1,272		\$1,536		\$1,278

*PreEx Wait: mos.*

*Smokers pay more*

**United Teachers: Women**

*Attained Age*

A	B	C	D	E	F	F Deduct	G
\$964	\$1,104	\$1,331	\$1,107		\$1,335		\$1,111

*PreEx Wait: mos.*

*Smokers pay more*

**Wellmark Blue Cross**

(800) 831-4818 *Attained Age*

[www.wellmark.com](http://www.wellmark.com)

A	B	C	D	E	F	F Deduct	G
\$631		\$1,336		\$1,093	\$1,392		\$1,339

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

During open enrollment you can buy any of these policies, regardless of your health. Premiums are the same as the company charges persons who are age 75 when they buy. Most companies don't sell to persons under 65 after open enrollment .



## Plans A-G No Drug benefits

## Annual Price when bought at Age 75

**American Family Mutual**  
(888) 374-7121 *Attained Age*  
www.amfam.com

A	B	C	D	E	F	F deduct	G
\$669					\$1,734		

*PreEx Wait: 0 mos*

*Crossover*

**Avera Select (Use Network Hospitals)**  
(888) 605-3229 *Issue Age*  
www.averaselect.com

A	B	C	D	E	F	F Deduct	G
\$906	\$1,006	\$1,265			\$1,354		

*PreEx Wait: 0 mos*

*Crossover*

*Medicare Select*

**Bankers Fidelity**  
(800) 241-1439 *Issue Age*  
www.bflic.com

A	B	C	D	E	F	F Deduct	G
\$624	\$1,080	\$1,325	\$1,346		\$1,472	\$907	

*PreEx Wait: 0 mos*

*Smokers pay more*

**Bankers Life**  
(800) 621-3724 *Attained Age*  
www.bankerslife.com

A	B	C	D	E	F	F Deduct	G
\$1,098	\$1,784	\$2,102	\$2,025	\$1,660	\$1,910	\$875	\$1,701

*PreEx Wait: 0 mos*

**Bankers Life (Retired SD state employees)**  
(800) 621-3724 *Attained Age*  
www.bankerslife.com

A	B	C	D	E	F	F Deduct	G
					\$1,461		

*PreEx Wait: 0 mos*

**Central States**  
(800) 541-2363 *Attained Age*  
www.cso.com

A	B	C	D	E	F	F Deduct	G
\$1,804	\$1,748	\$2,022	\$1,956		\$2,335		\$1,982

*PreEx Wait: 6 mos*

*Crossover*

*Smokers pay more*

**Combined Insurance**  
(800) 544-5531 *Issue Age*  
www.combinedinsurance.com

A	B	C	D	E	F	F Deduct	G
\$1,330	\$1,935	\$2,318	\$1,958		\$2,254	\$978	

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more (D&F)*

**Consitution Life (Men)**  
800-789-6364 *Attained Age*  
www.uafo.com

A	B	C	D	E	F	F Deduct	G
\$1,051	\$1,386	\$1,618	\$1,460		\$1,670		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Consitution Life (Women)**  
800-789-6364 *Attained Age*  
www.uafo.com

A	B	C	D	E	F	F Deduct	G
\$914	\$1,204	\$1,408	\$1,270		\$1,453		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

During open enrollment you can buy any of these policies, regardless of your health.  
Premiums are the same as the company charges persons who are age 75 when they buy.  
Most companies don't sell to persons under 65 after open enrollment .

## Plans A-G No Drug benefits

## Annual Price when bought at Age 75

	A	B	C	D	E	F	F deduct	G
<b>Equitable Life</b> (800) 352-5170 <i>Attained Age</i> www.EquiLife.com	\$842	\$1,415	\$1,699	\$1,591	\$1,611	\$1,848	\$832	\$1,690
	<i>PreEx Wait: 0 mos</i>			<i>Crossover</i>				
<b>Globe Life</b> <i>Attained Age</i> www.globeontheweb.com	\$824	\$1,306	\$1,551			\$1,557		
	<i>PreEx Wait: 0 mos</i>							
<b>Guarantee Trust</b> (800) 338-7452 <i>Attained Age</i> www.gtlic.com	\$1,113		\$2,180			\$2,201	\$628	\$1,997
	<i>PreEx Wait: 0 mos</i>							
<b>Medico Life</b>  www.mutprot.com	\$1,791		\$2,898			\$3,152		\$3,004
	<i>PreEx Wait: mos.</i>							
<b>Mennonite Mutual Aid (Members of Mennonite Assoc.)</b> (574) 533-9515 <i>Issue Age</i> www.mma-online.org	\$880				\$1,347	\$1,546		
	<i>PreEx Wait: mos.</i>							
<b>Mutual of Omaha</b> (800) 316-0842 <i>Attained Age</i>	\$1,264		\$1,540	\$1,416		\$1,562		\$1,237
	<i>PreEx Wait: 6 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		
<b>Mutual Protective</b>  www.mutprot.com	\$1,791		\$2,898			\$3,152		\$3,004
	<i>PreEx Wait: mos.</i>							
<b>National States</b> (800) 868-6788 <i>Issue Age</i>	\$849	\$1,643	\$2,991			\$1,921		
	<i>PreEx Wait: 0 mos</i>							
<b>Pennsylvania Life (Zip codes 570-1; 573-7): Men</b> (800) 275-7366 <i>Attained Age</i> www.uafc.com	\$1,038	\$1,375	\$1,582	\$1,511		\$1,630		
	<i>PreEx Wait: 3 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		
<b>Pennsylvania Life (Zip codes 570-1; 573-7): Women</b> (800) 275-7366 <i>Attained Age</i> www.uafc.com	\$941	\$1,246	\$1,432	\$1,369		\$1,477		
	<i>PreEx Wait: 3 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		

During open enrollment you can buy any of these policies, regardless of your health.  
Premiums are the same as the company charges persons who are age 75 when they buy.  
Most companies don't sell to persons under 65 after open enrollment .

## Plans A-G No Drug benefits

## Annual Price when bought at Age 75

**Pennsylvania Life: Men** (Zip codes not listed above)

800-275-7366 *Attained Age*  
www.uafo.com

A	B	C	D	E	F	F Deduct	G
\$909	\$1,203	\$1,384	\$1,322		\$1,426		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Pennsylvania Life: Women** (Zip codes not listed above)

800-275-7366 *Attained Age*  
www.uafo.com

A	B	C	D	E	F	F Deduct	G
\$823	\$1,090	\$1,253	\$1,198		\$1,292		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Physicians Life**

(800) 228-9100 *Attained Age*  
www.physiciansmutual.com

A	B	C	D	E	F	F Deduct	G
\$1,007	\$1,244				\$1,634		\$1,417

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

**Pyramid Life**

(800) 777-1126 *Attained Age*  
www.pyramidlife.com

A	B	C	D	E	F	F Deduct	G
\$1,658	\$1,624	\$2,138	\$1,625		\$2,089	\$559	\$1,728

*PreEx Wait: 6 mos*

*Crossover*

**Reserve National**

www.reservenational.com

A	B	C	D	E	F	F Deduct	G
\$829	\$1,313	\$1,643			\$1,947		

*PreEx Wait: mos.*

**Sioux Valley**

(888) 605-9277 *Attained Age*  
www.siouxvalley.org

A	B	C	D	E	F	F Deduct	G
\$865		\$1,571			\$1,737	\$782	

*PreEx Wait: 0 mos*

*Crossover*

*Medicare Select*

**Sioux Valley Select (Use Network Hospitals)**

(888) 605-9277 *Attained Age*  
www.siouxvalley.org

A	B	C	D	E	F	F Deduct	G
\$938		\$1,309			\$1,401		

*PreEx Wait: 0 mos*

*Crossover*

*Medicare Select*

**Standard Life & Accident: Men** (varies by zip code)

(888) 350-1488 *Attained Age*  
www.slaico.com

A	B	C	D	E	F	F Deduct	G
\$1,625	\$2,038	\$2,344	\$1,538	\$1,454	\$2,358	\$649	\$1,339

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

**Standard Life & Accident: Women** (varies by zip code)

(888) 350-1488 *Attained Age*  
www.slaico.com

A	B	C	D	E	F	F Deduct	G
\$1,407	\$1,765	\$2,030	\$1,332	\$1,259	\$2,042	\$562	\$1,339

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

During open enrollment you can buy any of these policies, regardless of your health.  
Premiums are the same as the company charges persons who are age 75 when they buy.  
Most companies don't sell to persons under 65 after open enrollment .

## Plans A-G No Drug benefits

## Annual Price when bought at Age 75

State Farm Mutual (call local agent)

Attained Age

www.statefarm.com

A	B	C	D	E	F	F Deduct	G
\$1,105		\$1,666			\$1,916		

PreEx Wait: 0 mos

Crossover

Thrivent for Lutherans

(800) 847-4836 Issue Age

www.thrivent.com

A	B	C	D	E	F	F Deduct	G
\$1,189		\$1,661	\$1,312		\$1,691		

PreEx Wait: 0 mos

Crossover

United American

(800) 331-2512

www.unitedamerican.com

A	B	C	D	E	F	F Deduct	G
\$1,180	\$1,915	\$2,237	\$2,135		\$2,366	\$2,213	

PreEx Wait: mos.

United Health Care (AARP members)

(800) 523-5800 Issue Age

www.aarphealthcare.com

A	B	C	D	E	F	F Deduct	G
\$799	\$1,383	\$1,610	\$1,492	\$1,492	\$1,673		\$1,528

PreEx Wait: 3 mos

Crossover

United Health Care (AARP members) Must meet health standards

(800) 523-5800 Issue Age

www.aarphealthcare.com

A	B	C	D	E	F	F Deduct	G
\$799	\$1,383	\$1,610	\$1,492	\$1,492	\$1,673		\$1,528

PreEx Wait: 3 mos

Crossover

United Health Care (AARP members) No health standards

(800) 523-5800 Issue Age

www.aarphealthcare.com

A	B	C	D	E	F	F Deduct	G
\$1,089	\$1,885	\$2,196	\$2,034	\$2,034	\$2,281		\$2,083

PreEx Wait: 3 mos

Crossover

United Teachers: Men

Attained Age

A	B	C	D	E	F	F Deduct	G
\$1,310	\$1,324	\$1,837	\$1,533		\$1,844		\$1,539

PreEx Wait: mos.

Smokers pay more

United Teachers: Women

Attained Age

A	B	C	D	E	F	F Deduct	G
\$1,637	\$1,331	\$1,597	\$1,334		\$1,603		\$1,338

PreEx Wait: mos.

Smokers pay more

Wellmark Blue Cross

(800) 831-4818 Attained Age

www.wellmark.com

A	B	C	D	E	F	F Deduct	G
\$749		\$1,582		\$1,230	\$1,649		\$1,588

PreEx Wait: 0 mos

Crossover

Smokers pay more

During open enrollment you can buy any of these policies, regardless of your health. Premiums are the same as the company charges persons who are age 75 when they buy. Most companies don't sell to persons under 65 after open enrollment .

## Plans A-G No Drug benefits

### Annual Price when bought at Age 80

	A	B	C	D	E	F	F deduct	G
<b>American Family Mutual</b> (888) 374-7121 <i>Attained Age</i> www.amfam.com	\$773					\$2,009		
	<i>PreEx Wait: 0 mos</i>			<i>Crossover</i>				
<b>Avera Select (Use Network Hospitals)</b> (888) 605-3229 <i>Issue Age</i> www.averaselect.com	\$906	\$1,006	\$1,347			\$1,441		
	<i>PreEx Wait: 0 mos</i>			<i>Crossover</i>		<i>Medicare Select</i>		
<b>Bankers Fidelity</b> (800) 241-1439 <i>Issue Age</i> www.bflic.com	\$642	\$1,152	\$1,426	\$1,472		\$1,598	\$959	
	<i>PreEx Wait: 0 mos</i>			<i>Smokers pay more</i>				
<b>Bankers Life</b> (800) 621-3724 <i>Attained Age</i> www.bankerslife.com	\$1,300	\$2,181	\$2,585	\$2,531	\$2,047	\$2,335	\$1,050	\$2,116
	<i>PreEx Wait: 0 mos</i>							
<b>Bankers Life (Retired SD state employees)</b> (800) 621-3724 <i>Attained Age</i> www.bankerslife.com						\$1,759		
	<i>PreEx Wait: 0 mos</i>							
<b>Central States</b> (800) 541-2363 <i>Attained Age</i> www.cso.com	\$2,142	\$2,076	\$2,403	\$2,361		\$2,773		\$2,387
	<i>PreEx Wait: 6 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		
<b>Combined Insurance</b> (800) 544-5531 <i>Issue Age</i> www.combinedinsurance.com	\$1,505	\$2,186	\$2,618	\$2,225		\$2,553	\$1,147	
	<i>PreEx Wait: 0 mos</i>			<i>Crossover</i>		<i>Smokers pay more (D&amp;F)</i>		
<b>Consitution Life (Men)</b> 800-789-6364 <i>Attained Age</i> www.uafo.com	\$1,152	\$1,540	\$1,814	\$1,630		\$1,870		
	<i>PreEx Wait: 3 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		
<b>Consitution Life (Women)</b> 800-789-6364 <i>Attained Age</i> www.uafo.com	\$1,001	\$1,340	\$1,578	\$1,418		\$1,626		
	<i>PreEx Wait: 3 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		

During open enrollment you can buy any of these policies, regardless of your health.  
Premiums are the same as the company charges persons who are age 75 when they buy.  
Most companies don't sell to persons under 65 after open enrollment .

## Plans A-G No Drug benefits

### Annual Price when bought at Age 80

	A	B	C	D	E	F	F deduct	G
<b>Equitable Life</b> (800) 352-5170 <i>Attained Age</i> www.EquiLife.com	\$871	\$1,506	\$1,874	\$1,787	\$1,765	\$2,006	\$902	\$1,907
	<i>PreEx Wait: 0 mos</i>			<i>Crossover</i>				
<b>Globe Life</b> <i>Attained Age</i> www.globeontheweb.com	\$828	\$1,323	\$1,660			\$1,670		
	<i>PreEx Wait: 0 mos</i>							
<b>Guarantee Trust</b> (800) 338-7452 <i>Attained Age</i> www.gtlic.com	\$1,245		\$2,436			\$2,465	\$704	\$2,233
	<i>PreEx Wait: 0 mos</i>							
<b>Medico Life</b>  www.mutprot.com	\$2,023		\$3,517			\$3,797		\$3,725
	<i>PreEx Wait: mos.</i>							
<b>Mennonite Mutual Aid (Members of Mennonite Assoc.)</b> (574) 533-9515 <i>Issue Age</i> www.mma-online.org	\$890				\$1,426	\$1,626		
	<i>PreEx Wait: mos.</i>							
<b>Mutual of Omaha</b> (800) 316-0842 <i>Attained Age</i>	\$1,456		\$1,773	\$1,630		\$1,799		\$1,424
	<i>PreEx Wait: 6 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		
<b>Mutual Protective</b>  www.mutprot.com	\$2,023		\$3,517			\$3,797		\$3,725
	<i>PreEx Wait: mos.</i>							
<b>National States</b> (800) 868-6788 <i>Issue Age</i>	\$949	\$1,844	\$3,353			\$2,157		
	<i>PreEx Wait: 0 mos</i>							
<b>Pennsylvania Life (Zip codes 570-1; 573-7): Men</b> (800) 275-7366 <i>Attained Age</i> www.uafc.com	\$1,138	\$1,531	\$1,754	\$1,689		\$1,806		
	<i>PreEx Wait: 3 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		
<b>Pennsylvania Life (Zip codes 570-1; 573-7): Women</b> (800) 275-7366 <i>Attained Age</i> www.uafc.com	\$1,030	\$1,387	\$1,589	\$1,530		\$1,636		
	<i>PreEx Wait: 3 mos</i>			<i>Crossover</i>		<i>Smokers pay more</i>		

During open enrollment you can buy any of these policies, regardless of your health.  
 Premiums are the same as the company charges persons who are age 75 when they buy.  
 Most companies don't sell to persons under 65 after open enrollment .



## Plans A-G No Drug benefits

## Annual Price when bought at Age 80

**Pennsylvania Life: Men** (Zip codes not listed above)

800-275-7366 *Attained Age*  
www.uafo.com

A	B	C	D	E	F	F Deduct	G
\$995	\$1,340	\$1,534	\$1,478		\$1,581		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Pennsylvania Life: Women** (Zip codes not listed above)

800-275-7366 *Attained Age*  
www.uafo.com

A	B	C	D	E	F	F Deduct	G
\$902	\$1,214	\$1,390	\$1,338		\$1,432		

*PreEx Wait: 3 mos*

*Crossover*

*Smokers pay more*

**Physicians Life**

(800) 228-9100 *Attained Age*  
www.physiciansmutual.com

A	B	C	D	E	F	F Deduct	G
\$1,099	\$1,389				\$1,861		\$1,612

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

**Pyramid Life**

(800) 777-1126 *Attained Age*  
www.pyramidlife.com

A	B	C	D	E	F	F Deduct	G
\$1,758	\$1,756	\$2,302	\$1,761		\$2,252	\$626	\$1,874

*PreEx Wait: 6 mos*

*Crossover*

**Reserve National**

www.reservenational.com

A	B	C	D	E	F	F Deduct	G
\$976	\$1,531	\$1,927			\$2,278		

*PreEx Wait: mos.*

**Sioux Valley**

(888) 605-9277 *Attained Age*  
www.siouxvalley.org

A	B	C	D	E	F	F Deduct	G
\$1,013		\$1,839			\$2,034	\$915	

*PreEx Wait: 0 mos*

*Crossover*

*Medicare Select*

**Sioux Valley Select (Use Network Hospitals)**

(888) 605-9277 *Attained Age*  
www.siouxvalley.org

A	B	C	D	E	F	F Deduct	G
\$938		\$1,395			\$1,492		

*PreEx Wait: 0 mos*

*Crossover*

*Medicare Select*

**Standard Life & Accident: Men** (varies by zip code)

(888) 350-1488 *Attained Age*  
www.slaico.com

A	B	C	D	E	F	F Deduct	G
\$1,870	\$2,345	\$2,698	\$1,770	\$1,673	\$2,714	\$747	\$1,594

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

**Standard Life & Accident: Women** (varies by zip code)

(888) 350-1488 *Attained Age*  
www.slaico.com

A	B	C	D	E	F	F Deduct	G
\$1,676	\$2,101	\$2,417	\$1,586	\$1,499	\$2,432	\$669	\$1,594

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

During open enrollment you can buy any of these policies, regardless of your health.  
Premiums are the same as the company charges persons who are age 75 when they buy.  
Most companies don't sell to persons under 65 after open enrollment .

## Plans A-G No Drug benefits

## Annual Price when bought at Age 80

**State Farm Mutual (call local agent)**

*Attained Age*

[www.statefarm.com](http://www.statefarm.com)

A	B	C	D	E	F	F Deduct	G
\$1,105		\$1,666			\$1,916		

*PreEx Wait: 0 mos*

*Crossover*

**Thrivent for Lutherans**

(800) 847-4836 *Issue Age*

[www.thrivent.com](http://www.thrivent.com)

A	B	C	D	E	F	F Deduct	G
\$1,189		\$1,661	\$1,312		\$1,691		

*PreEx Wait: 0 mos*

*Crossover*

**United American**

(800) 331-2512

[www.unitedamerican.com](http://www.unitedamerican.com)

A	B	C	D	E	F	F Deduct	G
\$1,180	\$1,935	\$2,397	\$2,296		\$2,452	\$2,290	

*PreEx Wait: mos.*

**United Health Care (AARP members) Must meet health standards**

(800) 523-5800 *Issue Age*

[www.aarphealthcare.com](http://www.aarphealthcare.com)

A	B	C	D	E	F	F Deduct	G
\$799	\$1,383	\$1,610	\$1,492	\$1,492	\$1,673		\$1,528

*PreEx Wait: 3 mos*

*Crossover*

**United Health Care (AARP members) No health standards**

(800) 523-5800 *Issue Age*

[www.aarphealthcare.com](http://www.aarphealthcare.com)

A	B	C	D	E	F	F Deduct	G
\$1,089	\$1,885	\$2,196	\$2,034	\$2,034	\$2,281		\$2,083

*PreEx Wait: 3 mos*

*Crossover*

**United Teachers: Men**

*Attained Age*

A	B	C	D	E	F	F Deduct	G
\$1,447	\$1,732	\$2,068	\$1,736		\$2,074		\$1,741

*PreEx Wait: mos.*

*Smokers pay more*

**United Teachers: Women**

*Attained Age*

A	B	C	D	E	F	F Deduct	G
\$1,258	\$1,506	\$1,799	\$1,510		\$1,804		\$1,514

*PreEx Wait: mos.*

*Smokers pay more*

**Wellmark Blue Cross**

(800) 831-4818 *Attained Age*

[www.wellmark.com](http://www.wellmark.com)

A	B	C	D	E	F	F Deduct	G
\$828		\$1,747		\$1,435	\$1,822		\$1,754

*PreEx Wait: 0 mos*

*Crossover*

*Smokers pay more*

During open enrollment you can buy any of these policies, regardless of your health. Premiums are the same as the company charges persons who are age 75 when they buy. Most companies don't sell to persons under 65 after open enrollment .

## **Plans H,I,J, & JDeductible**

We have grouped these three plans together because they are the only ones that include a benefit for prescription drugs

You must first pay an annual deductible of \$250. The plans will then pay 50% of the cost of each prescription up to the annual limit.

Basic Drugs: \$1,250 annual limit. Plans H \_ I

Extended Drugs: \$3,000 annual limit. Plan J & JDeduct

Plan JDeduct does not for any benefits until you have met the annual plan deductible.

## **Open Enrollment**

During open enrollment you have the guaranteed right to buy any of these policies from any company, with no questions asked about your health.

After open enrollment the company will ask health questions and can reject your application if you don't met its health standards.

### **United Health Care / AARP**

After Open Enrollment, United HealthCare (AARP) does not ask health questions if you apply within the first 3 years after you turn 65 and start on Medicare Part B. Your application will be approved regardless of your health (except for end stage renal disease). You will pay the Age 65 price as long as you enroll within the first 3 years of eligibility for Part B.

After your first three Medicare years, even AARP will reject your application for Plans H-J if you do not meet its health standards.

**During open enrollment you can buy any of these policies, regardless of your health.  
After open enrollment the company can reject your application if you don't met its health standards.**

## Plans With Drug Benefit

**H**
**I**
**J**
**Jdeduct**

### Annual Price when bought at Age 65

Equitable Life	H	I	J	J With Deductible
(800) 352-5170 <i>Attained Age</i> www.EquiLife.com	\$2,156	\$2,302	\$2,631	\$1,184
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	
Pyramid Life	H	I	J	J With Deductible
(800) 777-1126 <i>Attained Age</i> www.pyramidlife.com				\$950
	<i>PreEx Wait: 6 mos.</i>		<i>Crossover</i>	
Sioux Valley	H	I	J	J With Deductible
(888) 605-9277 <i>Attained Age</i> www.siouxvalley.org		\$2,187		
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	<i>Medicare Select</i>
Thrivent for Lutherans	H	I	J	J With Deductible
(800) 847-4836 <i>Issue Age</i> www.thrivent.com	\$2,238	\$2,518		
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	
United Health Care (AARP members)	H	I	J	J With Deductible
(800) 523-5800 <i>Issue Age</i> www.aarphealthcare.com	\$1,740	\$1,795	\$2,328	
	<i>PreEx Wait: 3 mos.</i>		<i>Crossover</i>	
Wellmark Blue Cross	H	I	J	J With Deductible
(800) 831-4818 <i>Attained Age</i> www.wellmark.com			\$2,987	
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	<i>Smokers pay more</i>

### Annual Price when bought at Age 70

Equitable Life	H	I	J	J With Deductible
(800) 352-5170 <i>Attained Age</i> www.EquiLife.com	\$2,451	\$2,615	\$2,963	\$1,334
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	
Pyramid Life	H	I	J	J With Deductible
(800) 777-1126 <i>Attained Age</i> www.pyramidlife.com				\$1,109
	<i>PreEx Wait: 6 mos.</i>		<i>Crossover</i>	
Sioux Valley	H	I	J	J With Deductible
(888) 605-9277 <i>Attained Age</i> www.siouxvalley.org		\$2,606		
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	<i>Medicare Select</i>
Thrivent for Lutherans	H	I	J	J With Deductible
(800) 847-4836 <i>Issue Age</i> www.thrivent.com	\$2,379	\$2,697		
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	

During open enrollment you can buy any of these policies, regardless of your health. After open enrollment the company can reject your application if you don't meet its health standards.

## Plans With Drug Benefit

**H**
**I**
**J**
**Jdeduct**

United Health Care (AARP members) Must meet health standards

**H**
**\$2,392**
**I**
**\$2,468**
**J**
**\$3,201**
**J With Deductible**

(800) 523-5800 *Issue Age*

www.aarphealthcare.com

**PreEx Wait: 3 mos.**

**Crossover**

Wellmark Blue Cross

**H**
**I**
**J**
**J With Deductible**

(800) 831-4818 *Attained Age*

www.wellmark.com

**PreEx Wait: 0 mos.**

**Crossover**

**Smokers pay more**

**\$3,660**

## Annual Price when bought at Age 75

Equitable Life

**H**
**\$2,774**
**I**
**\$2,963**
**J**
**\$3,347**
**J With Deductible**
**\$1,506**

(800) 352-5170 *Attained Age*

www.EquiLife.com

**PreEx Wait: 0 mos.**

**Crossover**

Pyramid Life

**H**
**I**
**J**
**J With Deductible**

(800) 777-1126 *Attained Age*

www.pyramidlife.com

**PreEx Wait: 6 mos.**

**Crossover**

**\$1,306**

Sioux Valley

**H**
**\$3,189**
**I**
**J**
**J With Deductible**

(888) 605-9277 *Attained Age*

www.siouxvalley.org

**PreEx Wait: 0 mos.**

**Crossover**

**Medicare Select**

Thrivent for Lutherans

**H**
**\$2,491**
**I**
**\$2,841**
**J**
**J With Deductible**

(800) 847-4836 *Issue Age*

www.thrivent.com

**PreEx Wait: 0 mos.**

**Crossover**

United Health Care (AARP members)

**H**
**\$2,392**
**I**
**\$2,468**
**J**
**\$3,201**
**J With Deductible**

(800) 523-5800 *Issue Age*

www.aarphealthcare.com

**PreEx Wait: 3 mos.**

**Crossover**

United Health Care (AARP members) Must meet health standards

**H**
**\$2,392**
**I**
**\$2,468**
**J**
**\$3,201**
**J With Deductible**

(800) 523-5800 *Issue Age*

www.aarphealthcare.com

**PreEx Wait: 3 mos.**

**Crossover**

Wellmark Blue Cross

**H**
**I**
**J**
**J With Deductible**

(800) 831-4818 *Attained Age*

www.wellmark.com

**PreEx Wait: 0 mos.**

**Crossover**

**Smokers pay more**

**\$4,310**

During open enrollment you can buy any of these policies, regardless of your health. After open enrollment the company can reject your application if you don't met its health standards.

## Plans With Drug Benefit

**H**
**I**
**J**
**Jdeduct**

### Annual Price when bought at Age 80

<b>Equitable Life</b>	<b>H</b>	<b>I</b>	<b>J</b>	<b>J With Deductible</b>
(800) 352-5170 <i>Attained Age</i> www.EquiLife.com	\$3,034	\$3,250	\$3,643	\$1,639
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	
<b>Pyramid Life</b>	<b>H</b>	<b>I</b>	<b>J</b>	<b>J With Deductible</b>
(800) 777-1126 <i>Attained Age</i> www.pyramidlife.com				\$1,436
	<i>PreEx Wait: 6 mos.</i>		<i>Crossover</i>	
<b>Sioux Valley</b>	<b>H</b>	<b>I</b>	<b>J</b>	<b>J With Deductible</b>
(888) 605-9277 <i>Attained Age</i> www.siouxvalley.org		\$3,733		
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	<i>Medicare Select</i>
<b>Thrivent for Lutherans</b>	<b>H</b>	<b>I</b>	<b>J</b>	<b>J With Deductible</b>
(800) 847-4836 <i>Issue Age</i> www.thrivent.com	\$2,491	\$2,841		
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	
<b>United Health Care (AARP members) Must meet health standards</b>	<b>H</b>	<b>I</b>	<b>J</b>	<b>J With Deductible</b>
(800) 523-5800 <i>Issue Age</i> www.aarphealthcare.com	\$2,392	\$2,468	\$3,201	
	<i>PreEx Wait: 3 mos.</i>		<i>Crossover</i>	
<b>Wellmark Blue Cross</b>	<b>H</b>	<b>I</b>	<b>J</b>	<b>J With Deductible</b>
(800) 831-4818 <i>Attained Age</i> www.wellmark.com			\$4,760	
	<i>PreEx Wait: 0 mos.</i>		<i>Crossover</i>	<i>Smokers pay more</i>

During open enrollment you can buy any of these policies, regardless of your health. After open enrollment the company can reject your application if you don't meet its health standards.



**Decided which plan you want?  
Looking for the best price?**

**The Price Shopper lists the annual  
premiums for each plan, from the  
lowest to highest premium.**

### **Cautions**

- All premiums shown assume you are buying at age 65.
- A company that looks good for 65 year olds might not look so good for older folks.
- Premiums can (and probably will) go up in the future.
- The company with the lowest price today....could have the highest price in the future !

**Use the Benefit Chart on the back cover  
for a quick reminder of each Plan's benefits.**

## Plan A

**Annual premiums at  
Purchase Age 65.  
Arranged from  
lowest to highest  
premium.**

**Age 65  
Only!**

**Price Caution**  
**Company on the low  
end at 65 could be  
on the high end at  
older ages.**

**All prices rounded  
to nearest dollar**

**Premiums Verified  
March, 2004**

Wellmark Blue Cross .....	Attained Age ....	\$515
American Family Mutual .....	Attained Age ....	\$522
Bankers Fidelity .....	Issue Age .....	\$558
United Health Care (AARP members) ...	Issue Age .....	\$581
Globe Life .....	Attained Age ....	\$583
Sioux Valley .....	Attained Age ....	\$593
Pennsylvania Life: Women .....	Attained Age ....	\$600
Reserve National .....		\$625
Equitable Life .....	Attained Age ....	\$637
Pennsylvania Life: Men .....	Attained Age ....	\$663
Consitution Life (Women) .....	Attained Age ....	\$666
National States .....	Issue Age .....	\$728
State Farm Mutual .....	Attained Age ....	\$737
Mennonite Mutual Aid .....	Issue Age .....	\$748
Avera Select (Use Network Hospitals) ...	Issue Age .....	\$751
Physicians Life .....	Attained Age ....	\$763
Consitution Life (Men) .....	Attained Age ....	\$767
Sioux Valley Select .....	Attained Age ....	\$777
Guarantee Trust .....	Attained Age ....	\$822
Bankers Life .....	Attained Age ....	\$827
United Teachers: Women .....	Attained Age ....	\$850
Mutual of Omaha .....	Attained Age ....	\$917
United Teachers: Men .....	Attained Age ....	\$978
Combined Insurance .....	Issue Age .....	\$1,069
United American .....		\$1,096
Thrivent for Lutherans .....	Issue Age .....	\$1,100
World Insurance .....		\$1,123
Standard Life & Accident: Women .....	Attained Age ....	\$1,197
Pyramid Life .....	Attained Age ....	\$1,208
Mutual Protective .....		\$1,240
Medico Life .....		\$1,240
Central States .....	Attained Age ....	\$1,279
Standard Life & Accident: Men .....	Attained Age ....	\$1,341

### Looking for a Company?

Addresses, phone numbers, and other information about each company are in the Company Directory on pages 65-71



## Plan B

Pennsylvania Life (Women) .....	Attained Age ....	\$778
Avera Select .....	Issue Age .....	\$828
Consitution Life (Women) .....	Attained Age ....	\$859
Pennsylvania Life (Men) .....	Attained Age ....	\$860
Bankers Fidelity .....	Issue Age .....	\$893
Globe Life .....	Attained Age ....	\$910
Physicians Life .....	Attained Age ....	\$943
United Teachers (Women) .....	Attained Age ....	\$968
Consitution Life (Men) .....	Attained Age ....	\$989
United Health Care (AARP members) ...	Issue Age .....	\$1,006
Reserve National .....		\$1,016
Equitable Life .....	Attained Age ....	\$1,038
United Teachers (Men) .....	Attained Age ....	\$1,114
Pyramid Life .....	Attained Age ....	\$1,167
Central States .....	Attained Age ....	\$1,239
Bankers Life .....	Attained Age ....	\$1,250
United American .....		\$1,334
National States .....	Issue Age .....	\$1,414
Standard Life & Accident (Women) .....	Attained Age ....	\$1,502
Combined Insurance .....	Issue Age .....	\$1,539
Standard Life & Accident (Men) .....	Attained Age ....	\$1,681

**Annual premiums at  
Purchase Age 65.  
Arranged from lowest  
to highest premium.**

**Age 65  
Only!**

**Price Caution**  
**Company on the low  
end at 65 could be  
on the high end at  
older ages.**

**All prices rounded  
to nearest dollar**

**Premiums Verified  
June, 2002**

## Reminders

- **Attained Age Rating:** Premiums increase with your age.
- **Issue Age Rating:** You always pay premiums based on your age when you bought the policy. If you buy at 65, you'll still be paying the premium the company charges 65 year-olds when you're 90.
- **Premiums:** Premiums will change (probably increase) whenever approved by the South Dakota Division of Insurance.

## Plan C

**Annual premiums at  
Purchase Age 65.  
Arranged from lowest  
to highest premium.**

**Age 65  
Only!**

**Price Caution  
Company on the low  
end at 65 could be  
on the high end at  
older ages.**

**All prices rounded  
to nearest dollar**

**Premiums Verified  
March, 2004**

Avera Select (Use Network Hospitals) ... Issue Age	\$888
Pennsylvania Life (Women) ..... Attained Age	\$918
Sioux Valley Select ..... Attained Age	\$920
Consitution Life (Women) ..... Attained Age	\$1,013
Pennsylvania Life (Men) ..... Attained Age	\$1,014
Bankers Fidelity ..... Issue Age	\$1,066
Globe Life ..... Attained Age	\$1,071
Wellmark Blue Cross ..... Attained Age	\$1,072
Sioux Valley ..... Attained Age	\$1,078
State Farm Mutual ..... Attained Age	\$1,111
Mutual of Omaha ..... Attained Age	\$1,116
Consitution Life (Men) ..... Attained Age	\$1,165
United Teachers (Women) ..... Attained Age	\$1,166
United Health Care (AARP members) ... Issue Age	\$1,171
Equitable Life ..... Attained Age	\$1,196
Reserve National ..... Attained Age	\$1,203
United Teachers: Men ..... Attained Age	\$1,341
Central States ..... Attained Age	\$1,435
Bankers Life ..... Attained Age	\$1,474
Thrivent for Lutherans ..... Issue Age	\$1,530
United American ..... Attained Age	\$1,538
Pyramid Life ..... Attained Age	\$1,541
Guarantee Trust ..... Attained Age	\$1,620
Standard Life & Accident (Women) ..... Attained Age	\$1,727
Combined Insurance ..... Issue Age	\$1,844
Standard Life & Accident (Men) ..... Attained Age	\$1,934
World Insurance ..... Attained Age	\$1,945
Mutual Protective ..... Attained Age	\$2,002
Medico Life ..... Attained Age	\$2,002
National States ..... Issue Age	\$2,573

## Plan D

Pennsylvania Life (Women) ..... Attained Age	\$852
Consitution Life (Women) ..... Attained Age	\$904
Pennsylvania Life (Men) ..... Attained Age	\$940
United Teachers: Women ..... Attained Age	\$970
Mutual of Omaha ..... Attained Age	\$1,027
Consitution Life (Men) ..... Attained Age	\$1,039
Equitable Life ..... Attained Age	\$1,080
United Health Care (AARP members) ... Issue Age	\$1,085
United Teachers: Men ..... Attained Age	\$1,115
Bankers Fidelity ..... Issue Age	\$1,116
Standard Life & Accident (Women) ..... Attained Age	\$1,133
Pyramid Life ..... Attained Age	\$1,169
Thrivent for Lutherans ..... Issue Age	\$1,170
Standard Life & Accident (Men) ..... Attained Age	\$1,269
Central States ..... Attained Age	\$1,322
Bankers Life ..... Attained Age	\$1,371
United American ..... Attained Age	\$1,446
Combined Insurance ..... Issue Age	\$1,500

**Annual premiums at  
Purchase Age 65.  
Arranged from lowest  
to highest premium.**

**Age 65  
Only!**

**Price Caution  
Company on the low  
end at 65 could be  
on the high end at  
older ages.**

**All prices rounded  
to nearest dollar**

**Premiums Verified  
March, 2004**

## Plan E

Wellmark Blue Cross .....	Attained Age ....	\$893
Standard Life & Accident (Women) .....	Attained Age ....	\$1,071
Mennonite Mutual Aid .....	Issue Age .....	\$1,074
United Health Care (AARP members) ...	Issue Age .....	\$1,085
Equitable Life .....	Attained Age ....	\$1,125
Bankers Life .....	Attained Age ....	\$1,148
Standard Life & Accident (Men) .....	Attained Age ....	\$1,199

## Plan F

Sioux Valley Select .....	Attained Age ....	\$913
Pennsylvania Life (Women) .....	Attained Age ....	\$946
Avera Select .....	Issue Age .....	\$948
Bankers Life (SD state retirees) .....	Attained Age ....	\$1,005
Pennsylvania Life (Men) .....	Attained Age ....	\$1,045
Consitution Life (Women) .....	Attained Age ....	\$1,046
Globe Life .....	Attained Age ....	\$1,078
Wellmark Blue Cross .....	Attained Age ....	\$1,117
Mutual of Omaha .....	Attained Age ....	\$1,133
United Teachers (Women) .....	Attained Age ....	\$1,170
Physicians Life .....	Attained Age ....	\$1,190
Sioux Valley .....	Attained Age ....	\$1,191
Consitution Life (Men) .....	Attained Age ....	\$1,203
United Health Care (AARP members) ...	Issue Age .....	\$1,217
Mennonite Mutual Aid .....	Issue Age .....	\$1,260
State Farm Mutual .....	Attained Age ....	\$1,277
Bankers Life .....	Attained Age ....	\$1,293
Bankers Fidelity .....	Issue Age .....	\$1,296
Equitable Life .....	Attained Age ....	\$1,297
American Family Mutual .....	Attained Age ....	\$1,328
United Teachers (Men) .....	Attained Age ....	\$1,346
Reserve National .....		\$1,442
Pyramid Life .....	Attained Age ....	\$1,507
Thrivent for Lutherans .....	Issue Age .....	\$1,535
Guarantee Trust .....	Attained Age ....	\$1,627
National States .....	Issue Age .....	\$1,653
Central States .....	Attained Age ....	\$1,655
Standard Life & Accident (Women) .....	Attained Age ....	\$1,738
Combined Insurance .....	Issue Age .....	\$1,799
Standard Life & Accident (Men) .....	Attained Age ....	\$1,946
United American .....		\$2,056
Mutual Protective .....		\$2,177
Medico Life .....		\$2,177
World Insurance .....		\$2,204

### Plan F with Deductible

Pyramid Life .....	Attained Age ....	\$409
Guarantee Trust .....	Attained Age ....	\$464
Standard Life & Accident (Women) .....	Attained Age ....	\$478
Standard Life & Accident (Men) .....	Attained Age ....	\$535
Sioux Valley .....	Attained Age ....	\$536
Equitable Life .....	Attained Age ....	\$585
Bankers Life .....	Attained Age ....	\$613
Combined Insurance .....	Issue Age .....	\$627
Bankers Fidelity .....	Issue Age .....	\$778
United American .....		\$1,784

### Plan G

Mutual of Omaha .....	Attained Age ....	\$897
United Teachers: Women .....	Attained Age ....	\$972
Physicians Life .....	Attained Age ....	\$1,030
Wellmark Blue Cross .....	Attained Age ....	\$1,091
United Health Care (AARP members) ...	Issue Age .....	\$1,111
Bankers Life .....	Attained Age ....	\$1,116
United Teachers: Men .....	Attained Age ....	\$1,119
Standard Life & Accident .....	Attained Age ....	\$1,139
Equitable Life .....	Attained Age ....	\$1,158
Pyramid Life .....	Attained Age ....	\$1,242
Central States .....	Attained Age ....	\$1,345
Guarantee Trust .....	Attained Age ....	\$1,484
Medico Life .....		\$1,989
Mutual Protective .....		\$1,989

### Plan H

United Health Care (AARP members) ...	Issue Age .....	\$1,740
Equitable Life .....	Attained Age ....	\$2,156
Thrivent for Lutherans .....	Issue Age .....	\$2,238

### Plan I

United Health Care (AARP members) ...	Issue Age .....	\$1,795
Sioux Valley .....	Attained Age ....	\$2,187
Equitable Life .....	Attained Age ....	\$2,302
Thrivent for Lutherans .....	Issue Age .....	\$2,518

### Plan J

United Health Care (AARP members) ...	Issue Age .....	\$2,328
Equitable Life .....	Attained Age ....	\$2,631
Wellmark Blue Cross .....	Attained Age ....	\$2,987

### Plan J with Deductible

Pyramid Life .....	Attained Age ....	\$950
Equitable Life .....	Attained Age ....	\$1,184

## Company Directory

These companies responded to SHIINE's 2004 survey. Others may also sell Medigap insurance in South Dakota.

American Family Mutual Insurance Company  
6000 American Parkway  
Madison, WI 537830001  
8883747121  
[www.amfam.com](http://www.amfam.com)  
Plans Sold:A,F

Avera Select  
2811 E. 26th Street Suite 101  
Sioux Falls, SD 57103  
8886053229  
[www.averaselect.com](http://www.averaselect.com)  
Plans Sold:A,B,C,F

Bankers Fidelity Life Insurance Company  
4370 Peachtree Rd N.E.  
Atlanta, GA 30319  
8002411439  
[www.bflic.com](http://www.bflic.com)  
Plans Sold:A,B,C,D,F,Fdeduct,

Bankers Life and Casualty  
222 Merchandise Mart Plaza  
Chicago, IL 60654  
8006213724  
[www.bankerslife.com](http://www.bankerslife.com)  
Plans Sold:A,B,C,D,E,F,Fdeduct,G

Central States Health & Life of Omaha  
P.O. BOX 34350  
Omaha, NE  
8005412363  
[www.cso.com](http://www.cso.com)  
Plans Sold:A,B,C,D,F,G

Combined Ins Co of America  
5050 Broadway  
Chicago, IL 60640  
8005445531  
[www.combinedinsurance.com](http://www.combinedinsurance.com)  
Plans Sold:A,B,C,D,F,Fdeduct

Constitution Life Insurance Company  
600 Courtland Street  
Orlando, FL 32804  
800-789-6364  
[www.uafc.com](http://www.uafc.com)  
Plans Sold:A,B,C,D,F

Equitable Life & Casualty Insurance Company  
3 Triad Center  
Salt Lake City, UT  
8003525170  
[www.EquiLife.com](http://www.EquiLife.com)  
Plans  
Sold:A,B,C,D,E,F,Fdeduct,G,H,I,J,Jdeduct

Globe Life & Accident Insurance  
Oklahoma City, OK  
[www.globeontheweb.com](http://www.globeontheweb.com)  
Plans Sold:A,B,C,F

Guarantee Trust Life Insurance Company  
1275 Milwaukee Avenue  
Glenview, IL 60025  
8003387452  
[www.gtlic.com](http://www.gtlic.com)  
Plans Sold:A,C,F,Fdeduct,G

Medico Life Insurance Co.  
1515 South 75th Street  
Omaha, NE 68124  
[www.mutprot.com](http://www.mutprot.com)  
Plans Sold:A,C,F,G

Mennonite Mutual Aid Association  
P.O. Box 483  
Goshen, IN 46527  
5745339515  
[www.mma-online.org](http://www.mma-online.org)  
Plans Sold:A,E,F,I

Mutual of Omaha Insurance Company  
Mutual of Omaha Plaza  
Omaha, NE 68175  
8003160842  
Plans Sold:A,C,D,F

Mutual Protective Life  
1515 South 75th Street  
Omaha, NE 68124  
[www.mutprot.com](http://www.mutprot.com)  
Plans Sold:A,C,F,Fdeduct,G

National States Ins. Co  
1830 Craig Park Court  
St. Louis, MO 63146  
8008686788  
Plans Sold:A,B,C,F

Pennsylvania Life Insurance Company  
600 Courtland Street  
Orlando, FL 32804  
8002757366  
[www.uafc.com](http://www.uafc.com)  
Plans Sold:A,B,C,D,F

Physicians Life Insurance Co.  
2600 Dodge St  
Omaha, NE 68131  
8002289100  
[www.physiciansmutual.com](http://www.physiciansmutual.com)  
Plans Sold:A,B,F,G

Pyramid Life Insurance Company  
600 Courtland Street  
Orlando, FL 32804  
8007771126  
[www.pyramidlife.com](http://www.pyramidlife.com)  
Plans Sold:A,B,C,D,F,Fdeduct,G,Jdeduct

Reserve National Insurance  
6100 NW Grand Blvd.  
Oklahoma City, OK 73118  
[www.reservenational.com](http://www.reservenational.com)  
Plans Sold:A,B,C,F

Sioux Valley Health Plan  
1100 E. 21st St., #600  
Sioux Falls, SD 57105  
8886059277  
[www.siouxvalley.org](http://www.siouxvalley.org)  
Plans Sold:A,C,F,Fdeduct,I

Standard Life & Accident  
1 Moody Plaza  
Galveston, TX 77550  
8883501488  
[www.slaico.com](http://www.slaico.com)  
Plans Sold:A,B,C,D,E,F,Fdeduct,G

State Farm Mutual Automobile Insurance  
Company  
One State Farm Plaza  
Bloomington, IL 61710  
[www.statefarm.com](http://www.statefarm.com)  
Plans Sold:A,C,F

Thrivent Financial for Lutherans  
4321 N Ballard Rd  
Appleton, WI 54919  
8008474836  
[www.thrivent.com](http://www.thrivent.com)  
Plans Sold:A,C,D,F,H,I

United American  
P.O. Box 8080  
McKinney, TX 75070  
8003312512  
[www.unitedamerican.com](http://www.unitedamerican.com)  
Plans Sold:A,B,C,D,F,Fdeduct

The United HealthCare Ins. Co. (AARP)  
P.O. Box 8009  
Philadelphia, PA 19101  
8005235800  
[www.aarphealthcare.com](http://www.aarphealthcare.com)  
Plans Sold:A,B,C,D,E,F,G,H,I,J

United Teachers Associates Ins. Co.  
800-880-8824  
Plans Sold:A,B,C,D,F,G

Wellmark Blue Cross and Blue Shield of SD  
1601 West Madison Street  
Sioux Falls, SD 57104  
8008314818  
[www.wellmark.com](http://www.wellmark.com)  
Plans Sold:A,C,E,F,G,J

World Insurance  
P.O. Box 3160  
Omaha, NE 68103  
8006007760  
Plans Sold:

These companies responded  
to SHIINE's 2004 survey.  
Others may also sell Medigap  
insurance in South Dakota.



Medicare generally does not pay for prescription drugs outside a hospital. There are, however, some exceptions, which are described on the next page.

In 2003 Congress made important changes to Medicare’s drug coverage. Some changes take effect in 2004. Others do not start until 2006. We have described them on pages 66-67.

We have also included information about sources for free drugs for low income persons and discount cards for others. This is the same information that we printed in the 2003 edition of the Guide and may now be incomplete.

	Page
Medicare & Prescription Drugs .....	65
New in 2004 .....	66
Coming in 2006 .....	67
Gap Filling Options .....	68
Drug Company Discounts .....	69
Free Drugs for Very Low Income .....	70



## Medicare & Prescription Drugs

Medicare pays most of the health care expenses of almost 40 million Medicare beneficiaries. If we were creating the Medicare program today, a prescription drug benefit certainly would be included.

However, in 1965 (when Medicare was created) prescription drugs played a less prominent role in health care. Congress focused instead on ensuring access to inpatient hospital care (Medicare Part A) and providing access to physicians (Medicare Part B).

Today, however, Medicare beneficiaries rely on prescription drugs as an integral part of their health care. Although, Medicare does not generally cover over-the-counter or outpatient prescription drugs, Medicare does cover some drugs.

### When Medicare Pays for Prescription Drugs (Outside Hospital)

The approved charges for drugs Medicare adds up to more than \$5 billion a year. Medicare generally pays 80% of that bill (\$4 billion) and

Medicare patients pay the rest.

- Vaccines for diseases like flu, pneumonia, and hepatitis (generally no copayment for these)
- Drugs typically provided in the hospital outpatient setting, dialysis centers, or in the doctor's office, and purchased directly by the physician or provider.
- Drugs that are not self-administered and furnished "incident to" a physician's service, such as prostate cancer drugs;
- Erythropoietin (EPO), far and away the drug Medicare spends the most money on, is used primarily to treat anemia in end stage renal disease patients and in cancer patients;
- Some self-administered oral cancer and anti-nausea drugs;
- Some drugs used as part of durable medical equipment or infusion devices, (e.g., the albuterol that is put into nebulizers, used by asthma patients);
- Immunosuppressive drugs, which are used following organ transplants;
- Osteoporosis drugs furnished to certain beneficiaries by home health agencies

Summary of 2003  
Additions to  
Medicare's Drug Coverage  
on the next two pages

## The 2003 Medicare Reform Bill

In 2003 Congress added some limited prescription drug benefits to Medicare.

### Starting in Summer of 2004

Medicare is contracting with private companies to offer Medicare-approved drug discount cards. You can choose one of the discount cards to get lower prices on some prescription drugs.

#### How It Works

- Medicare contracts with drug company
- Company sells discount cards--prices vary from \$10-\$30.
- You use the discount card at local pharmacy.
- Amount of discount will vary depending on the drug--and on the company that issued the card.
- Discount could range from 10-25%.

#### Low Income Benefit

If your income is low enough, you might qualify for a \$600 credit on the drug discount card. The card is also free.

You can use the credit to help pay for prescription drugs. The 2004 Income limits:

- ➔ Single person: Below \$12,570;
- ➔ Married couple: Below \$16,864

You cannot get the discount and free card if you already have drug coverage--for example from your retirement plan or from Medicaid.

#### Do I have to enroll in a Medicare-approved drug discount card?

No, these discounts cards are voluntary. That means enrolling is your choice. If you want to enroll, contact the company offering the card you choose.

### To Learn More

#### Call Medicare

Call 1-800-MEDICARE (1-800-633-4227) and ask about "drug savings." TTY users call 1-877-486-2048.

#### On the Web

[www.medicare.gov](http://www.medicare.gov)

Select "Prescription Drug and Other Assistance Programs."

The website includes:

- list of all Medicare-approved cards, enrollment fees, and addresses;
- price comparisons for prescription drugs

#### Call SHINE

**1-800-536-8197**

#### Many Cards to Choose From

As of April 1, 2004, South Dakotas residents had 28 approved cards to pick from.

Card prices range from \$10 to \$30 (the maximum allowed).

#### Brand New!

This Consumer Guide was written in April, 2004. The discount cards are supposed to hit the market in May and June of 2004.

**Prescription Drug Benefits** will be added to Medicare in 2006. All people with Medicare will be able to enroll in plans that cover prescription drugs. Plans might vary, but in general, this is how they will work **IF** Congress does not change the program before January 1, 2006.

### Medicare & Drugs After 2006

- You will choose a prescription drug plan and pay a premium of about \$35 a month.
- You will pay the first \$250 (called a “deductible”).
- Medicare will pay 75% of drug costs between \$250 and \$2,250 in drug spending. You will pay only 25% of these costs.
- You will pay 100% of drug costs above \$2,250 until you reach \$3,600 in out-of-pocket spending.
- Medicare will pay about 95% of the costs after you have spent \$3,600.
- Some prescription drug plans may have additional options to help you pay the out-of-pocket costs.

### Low Income Benefits In 2006

Extra help will be available for people with low incomes and limited assets.

- Most significantly, people with Medicare in the greatest need, who have incomes below a certain limit won't have to pay the premiums or deductible for prescription drugs.
- The income limits will be set in 2005. If you qualify, you will only pay a small co-payment for each prescription you need.
- Other people with low incomes and limited assets will get help paying the premiums and deductible.
- The amount they pay for each prescription will be limited.

# Filling the Drug Gap

## Hardest Gap to Fill

As a general rule, Medicare does not pay for prescription drugs except when they are provided in the hospital.

## Present Choices

### Retirement Coverage

If your company or union health plan covers prescription drugs, that benefit may still be available to you after retirement.

- The typical benefit requires you to pay a fixed amount for each prescription.
- You may be required to use a mail order prescription service. The plan may also require you to use generic drugs to keep costs down.

### Medigap Plans H, I, & J

Only three of the 10 Medigap plans cover prescription drugs.

- You must pay the full cost for the first \$250 of drugs (the *deductible*).
- After the deductible, you must pay one-half the cost of each prescription.
- Plans H & I have an annual limit of \$1,250. That means the policy would stop paying after you had paid \$1,500, and your total drug bill reached \$2,750.
- Plan J has an annual limit of \$3,000. That means the policy would stop paying after you had paid \$3,250 and your total drug bill reached \$6,250.

Only a few companies sell any of these three plans. *They are priced on pages 51-54.*

### PFFS

Humana's PFFS plan includes a prescription drug benefit.

- The plan has co-payments (\$10 for generic drugs, all but \$10 for name-brand drugs).

*More details on page 75*

### Drug Discount Services

Numerous companies offer discounts on prescription drugs. Some are mail order, others provide you with a card to use at "participating pharmacies."

### Drug Company Cards

Several large companies have set up new discount programs for people who use their drugs. If your income is low enough, these programs issue cards that you can use at "participating pharmacies."

*We've included details for some of these programs on the next page.*

### Medigap Drug Discount Cards

Some insurance companies provide drug discount cards as a free benefit with their Medigap policies. In response to SHINE's survey, the following companies said they have discount programs. More details are included in the individual company listings in the *Company Directory* on pages

- Avera Select
- Bankers Life & Causalty
- Central States Health & Life
- Equitable Life
- Physicians Mutual
- Standard Life & Accident
- United American
- United Health Care (AARP)
- Wellmark Blue Cross & Blue Shield

## Drug Company Discount Cards

Each of these drug plans is sponsored by one or more drug companies. They have the following features in common.

- ☑ You fill out an application that includes information about your income. You can get an application form by calling the company's toll-free number. Each of these companies has application forms on its internet website.
- ☑ Your income must be less than the program limits.
- ☑ You cannot have any other coverage for prescription drugs. However, you can probably have a card from more than one company.
- ☑ You get the benefit only when you buy drugs that are made by the company that sponsors the plan.
- ☑ You use your card at the local pharmacy. You should check in advance to make sure the pharmacy will accept the card.
- ☑ The card is free.

### LillyAnswers

- Sponsor: Lilly
- Benefit: \$12 per prescription  
30-day supply
- Income Limit  
Single: \$28,000  
Couple: \$38,000
- Phone: 1-877-795-4559  
[www.lillyanswers.com](http://www.lillyanswers.com)

### Novartis Care Card

- Sponsor: Novartis
- Benefit: \$12 per prescription
- Income Limit  
Single: \$28,000  
Couple: \$38,000
- Phone: 1-866-974-2273  
[www.careplan.novartis.com](http://www.careplan.novartis.com)

### Orange Card

- Sponsor: GlaxoSmithKline
- Benefit: Discount varies
- Income Limit  
Single: \$30,000  
Couple: \$40,000
- Phone: 1-888-672-6436

### Share Card

- Sponsor: Pfizer
- Benefit: \$15 per prescription  
30-day supply
- Income Limit  
Single: \$14,000  
Couple: \$24,000
- Phone: 1-800-717-6005  
[www.pfizersharecard.com](http://www.pfizersharecard.com)

### Together Rx

- Sponsor: Numerous companies
- Benefit: Discount varies
- Income Limit  
Single: \$28,000  
Couple: \$38,000
- Phone: 1-800-865-7211  
[www.togetherrx.com](http://www.togetherrx.com)

### Caution

- This information is based on publications by each drug company.
- Your local pharmacy may not participate in one or more of the plans.
- These plans have all been started since 2000.

## Free Drugs from Drug Companies

Many drug companies have private programs to provide free prescription drugs to low income people.

Each company has its own rules for qualifying and receiving drugs. Typical eligibility requirements include:

- No other insurance coverage for prescription medications
- Very Low income

For more information about drug discount programs

**South Dakota Adult Services & Aging**

**1-866-854-5465**

**or on the internet**

**Check these web-sites on the internet:**

### **www.RxAssist.com**

RxAssist is operated by the Robert Wood Johnson Foundation. It “provides physicians and other health care providers with the information they need to access” drug assistance programs offered by drug companies.

### **www.needymeds.com**

NeedyMeds claims to have the latest, most complete, and most accurate information on patient assistance programs available. It includes a chart that compares some of the major drug assistance programs. It lists over 1,000 drugs, the companies that makes them, and how to contact those companies for assistance. It does not appear to be directly associated with the companies.

### **helpingpatients.org**

Helpingpatients is operated by PhRMHA, an association of 48 large drug companies. This site can help you find patient assistance programs for which you may qualify.

### **www.rxhope.com**

Rxhope calls itself the “Heart of the Pharmaceutical Industry.” It is associated with PhRMA and can help you apply for drug assistance programs. The application is available on the site.

### **www.webmd.com**

WebMD is a private company that claims to provide a “range of information, transaction and technology solutions that help consumers, physicians, providers and health plans navigate the complexity of the healthcare system. Our products and services promote more informed decision-making, increased efficiency and, ultimately, higher quality patient care at a lower cost.”

### **RxAccess**

RxAccess helps low income people with no private drug coverage access these private programs. Eligibility:

- Over age 19
- Couple: \$14,000 income; \$6,000 cash assets
- Single: \$10,000 income; \$4,000 cash assets

**SD Department of Adult Services & Aging**

**1-866-854-5465**

The program is directed by a pharmacist.



The appendix includes a variety of information that you may find helpful either while shopping for insurance or coping with Medicare and private insurance.

### Contents

	Page
Medicare Summary Notice .....	72
Part B Billing Examples .....	74
Medicare Terms .....	75
Medicare Publications .....	80
Medicare's Medigap Guide .....	83
Check Company's Financial Ratings .....	84
Directory of SHIP Programs .....	85
Handy Phone Numbers .....	86
County Office Contacts .....	87
SHIINE .....	88
Medigap Shopper's Worksheet .....	89



# Not a Bill! The Medicare Summary Notice

When your doctor or other medical provider sends a bill to Medicare, Medicare sends you a **Summary Notice** to show what Medicare did with the bill. Until recently this notice was called the **Explanation of Benefits**. The sample on the next page is for Medicare Part B charges by a physician who does **not** accept Medicare assignment and may bill you as much as 15% more than Medicare approves. A similar form is used to inform you of Part A charges.

Numbers below match numbers on the sample on the next page.

- 1 The **Date** the Notice was sent.
- 2 **For all inquiries**, include your Medicare number, the date of the notice, and the specific date of service you have questions about.
- 3 Your **Medicare Number** should match the number on your Medicare card.
- 4 If your **Name and Address** are incorrect, contact both the Medicare intermediary and Social Security Administration.
- 5 Read the **Help Stop Fraud** message for information on ways to protect yourself and Medicare against fraud and abuse.
- 6 Part B Medical Insurance - Non-Assigned Claims. The provider has **not** agreed to Medicare billing limits so can charge 15% above Medicare approved amount.
- 7 **Dates of Service** shows when your doctor or supplier provided the service(s) listed.
- 8 Refer to the **Claim Number** if you call with questions about the charges.
- 9 **Services Provided** describes the service that was provided.
- 10 **Amount Charged** is the amount the provider billed to Medicare.
- 11 **Medicare Approved** is the amount Medicare approved for the service.
- 12 **Medicare Paid Provider** is how much Medicare paid on your behalf. This is generally 80 percent of the approved amount minus your annual deductible. If the provider had not accepted assignment, Medicare would pay you this amount.
- 13 **You May Be Billed**. This is the total amount the provider is allowed to bill you. Because the claim is not assigned, the provider can bill up to 115% of the approved amount. If you have Medigap, it may pay part or all of this amount.
- 14 **See Notes Section**. If a letter appears in this column, refer to that letter in the Notes Section on the back of your notice.
- 15 **Provider's Name and Address**. If you were treated by a clinic or group medical practice, the clinic or group name will be shown, followed by the name of the doctor who performed the service. If the service was ordered or referred by another doctor, the referring doctor's name may also be listed. The billing address may not be where you received the service(s).
- 16 **Notes Section** gives more detailed information about your claim.
- 17 **Deductible Information** shows how much you have paid toward your annual deductible.
- 18 **General Information**. This tells you important Medicare news and information.
- 19 **Appeals Information** includes how and when to request an appeal. More information is on the back of the notice.

## Computer Users

You can find samples of other Medicare Summary Notices at the Medicare website.

[www.medicare.gov](http://www.medicare.gov)

The Summary Notice is NOT a bill.



BERTHA BENEFICIARY  
1111 WELCOME STREET  
ANYTOWN, SD 57501

4

5

**HELP STOP FRAUD:** Beware of telemarketers offering free or discounted Medicare items or services

## CUSTOMER SERVICE INFORMATION

2

3 Your Medicare Number: 222-22-2222A

If you have questions, write or call:  
**Noridian Mutual Insurance Company**  
4510 13th Avenue Southwest  
Fargo, ND 58121-0001

**Local:** 877-908-8431

**Toll-free:** 1-800-437-4762

**TTY for Hearing Impaired:** 1-888-552-9336

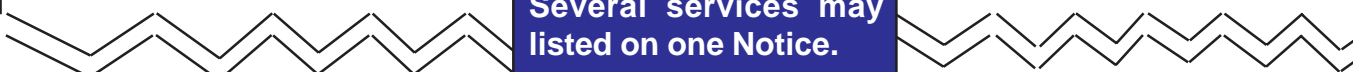
This is a summary of claims processed from 7/1/2003 through 8/1/2003

## 6 PART B MEDICAL INSURANCE -- UNASSIGNED CLAIMS

12

13

14

Dates of Service	9 Services Provided	10 Amount Charged	11 Medicare Approved	Medicare Paid You	You May Be Billed	See Notes Section
7	8 Claim Number 12345 <b>Lydia Johnson, MD.</b> 123 First St. Pierre, SD 57503 7/15/03 Office/Outpatient Visit, ES (9214)	15 \$55.00	\$44.35	\$35.48	\$51	a b
						

Several services may  
be listed on one Notice.

This is Not a Bill. Keep This Notice for Your Records.

This information is  
on a separate page.

Your Medicare Number: 222-22-2222A

Page 2 of 2  
September 1, 2003

Notes Section:

16

- a This information is being sent to your private insurer(s). Send any questions regarding your benefits to them.
- b This approved amount has been applied toward your deductible.

## Deductible Information:

17 You have already met your \$100 Part B deductible for 2003.

## General Information:

18 Please notify us if your address has changed or is incorrect as shown on this notice.

## Appeals Information--Part B

19

If you disagree with any claims decision on this notice, you can request an appeal by March 1, 2003.

Follow the instructions below:

- 1) Circle the item(s) you disagree with and explain why you disagree.
- 2) Send this notice, or a copy, to the address in the "Customer Service Information" box on Page 1.
- 3) Sign here \_\_\_\_\_ Phone number (\_\_\_\_) \_\_\_\_\_

# Medicare Part B Billing & Payment Examples

Examples

## In each example

- You have already paid your annual Part B deductible.
- The doctor charges \$150 for the service.
- Medicare approves \$100.
- Medicare will pay the doctor \$80.

Examples

### Doctor Takes Assignment No Supplemental Insurance

- The doctor bills Medicare directly.
- Medicare pays the doctor \$80.
- You pay the doctor \$20.
- Doctor cannot collect the \$50 balance.

### Doctor Takes Assignment Medigap Insurance (Plans A-J)

- The doctor bills Medicare directly.
- Medicare pays the doctor \$80.
- Medigap pays the doctor \$20.
- Doctor cannot collect the \$50 balance.

### Doctor does NOT Take Assignment No Supplemental Insurance

- The doctor bills Medicare directly.
- Medicare pays the doctor \$80.
- You pay the doctor \$35.
- Doctor cannot collect the \$35 balance.

### Doctor does NOT Take Assignment Medigap Insurance (except Plans F, G, I, J)

- The doctor bills Medicare directly.
- Medicare pays the doctor \$80.
- Medigap pays the doctor \$20
- You pay the doctor \$15
- Your doctor cannot bill you for the \$35 balance.

### Doctor does NOT Take Assignment Medigap Insurance (Plans F, G, I, J)

- The doctor bills Medicare directly.
- Medicare pays the doctor \$80.
- Medigap pays the doctor  
\$20 (Plans F, I, J)  
\$16 (Plan G).
- You pay the doctor \$15 (H,I,J) or \$19 (G).
- Your doctor cannot collect the \$35 balance.

### Doctor does NOT Take Assignment Employer Retirement Plan (NOT Medigap)

- The doctor bills Medicare directly.
- Medicare pays the doctor \$80.
- The doctor can collect an additional \$35.
- Your retirement plan **may** pay part or none of the \$35 balance.

### You belong to Private Fee For Service (Sterling or Humana)

- Medicare has pre-paid Sterling or Humana.
- The company, not Medicare, sets the billing limits.
- You pay the doctor \$10.

# Medicare Terms

## Actual Charge

The amount a provider charges for a medical service or supply. This is often more than Medicare approves. (See Approved Amount; Assignment.)

## Approved Amount

The amount Medicare sets as reasonable for a covered medical service. This may be less than the actual amount charged. Sometimes called the “Approved Charge.” (See Actual Charge, Assignment.)

## Assignment

A provider who takes assignment agrees to accept the Approved Amount as full payment. You still pay your share of the cost of the doctor visit. (See Actual Charge; Approved Amount; Co-payment.)

## Balance Billing

Doctors and other providers that don’t participate in Medicare can charge and bill you 15% more than the plan’s payment amount for services. This extra charge is called a “balance bill” or “excess charge.”

## Beneficiary

The person who has health insurance through the Medicare or Medicaid program.

## Benefit Period

Medicare uses *benefit periods* to measure time spent in a hospital or skilled nursing facility. A benefit period starts the day you check in and ends when you haven’t received hospital or skilled nursing care for 60 days in a row. There is no limit to the number of benefit periods you can have. (See Deductible; Skilled Nursing Facility.)

## Benefits

The money or services provided by an insurance policy. In a health insurance policy, benefits are the money the company pays for your care.

## Centers for Medicare & Medicaid Services

The federal agency that oversees Medicare. It used to be known as HCFA.

## Carrier

The *Medicare carrier* is a private insurance company that contracts with Medicare to process claims for Medicare Part B. The carrier for South Dakota is Noridian Mutual Insurance Co. Call Noridian with questions on Medicare part B coverage, bills & medical services and tips on how to recognize Medicare fraud and abuse. **1-800-437-2522.**

## Coinsurance (Medicare)

The percent of the Medicare-approved amount that you must pay after you pay the deductible for Part A and/or Part B. In the Original Medicare Plan, the coinsurance payment is a percentage of the cost of the service (usually 20% for most Part B services).

## Co-payment

An amount you must pay for each medical service, like a doctor visit. A Co-payment is usually a set amount you pay for a service. For example, this could be \$5.00 or \$10.00 for a doctor visit. Co-payments are also referred to as **coinsurance**.

## Covered Service.

A health service included in your health plan.

## Creditable Coverage

When you move directly from one health insurance plan to a new plan, that has a waiting period for pre-existing conditions, you get “credit” for the time you were covered under the old plan.

**Crossover Contract**

A contract between Medicare and a Medigap insurance company. If the Medigap company has a crossover contract, Medicare automatically sends your claims to the company for payment.

**Deductible**

The amount you must pay for health care before Medicare or private insurance starts to pay.

**Deductible (Part B)**

The amount you must pay for Medical services each calendar year before Medicare begins to pay. In 2004 the Part B deductible is \$100.

**Durable Medical Equipment (DME)**

Medical equipment that is ordered by a doctor for use in the home. These items must be reusable, such as walkers, wheelchairs, or hospital beds. Covered by Medicare Part B.

**Durable Medical Equipment Regional Carrier (DMERC)**

The DMERC is a private company that contracts with Medicare to process claims for medical equipment. The DMERC for South Dakota is Cigna Medicare. **1-800-899-7095**

**End-Stage Renal Disease (ESRD)**

Kidney failure that requires lifetime dialysis or a transplant. This is the one condition that makes you ineligible to join a Medicare HMO.

**Excess Charge (Medigap)**

Term used to describe Medigap benefit that pays the difference between a provider's actual charge and the Medicare-approved payment amount. The excess charge cannot be more than 15% above the approved amount.

**Exclusions**

Things that are not covered by an insurance plan (Medicare or private insurance).

**Free Look Period**

The first 30 days after you buy a Medigap policy. During the free look period, you can change your mind, cancel the policy, & get a full refund.

**Gaps**

Medical expenses not covered by Medicare.

**General Enrollment Period (GEP)**

Medicare's GEP is January 1 through March 31 of each year. If you enroll in Part B during the GEP, your coverage starts on the following July 1.

**Guaranteed Renewable**

Insurance company must automatically renew your Medigap policy (despite your age & health) unless you do not pay your premiums.

**Health Care Provider**

Doctors, nurses, and hospitals are examples of health care providers.

**Home Health Agency**

An organization that gives home care services, like skilled nursing care, physical therapy, occupational therapy, speech therapy, and care by home health aides.

**Home Health Care**

Skilled nursing care and certain other health care you get in your home for the treatment of an illness or injury.

**Hospice**

A special way of caring for people who are terminally ill, and for their family. Hospice care includes physical care and counseling. Most hospice expenses (including medications) are covered under Medicare Part A.

**Inpatient Care**

Health care when you are admitted to a hospital and stay at least one night.

### **Intermediary**

The *Medicare intermediary* is a private insurance company that contracts with Medicare to process claims under Medicare Part A. The intermediary for South Dakota is Cahaba Health benefits Administration. Call Cahaba about Part A bills and services, hospital care, skilled nursing care, and fraud or abuse. **1-515-471-7200**

### **Lifetime Reserve Days (Medicare)**

60 days that Medicare will pay for when you are in a hospital for more than 90 days. Reserve days can be used only once during your lifetime, but the first 90 days can be used repeatedly (in different benefit periods).

### **Limiting Charge**

The highest amount you can be charged for a covered service by doctors and other health care providers who don't accept assignment. The limit is 15% over Medicare's approved amount. Applies only to certain services and does not apply to supplies or equipment.

### **Election Period**

The time during which you can choose the type of Medicare plan you want and switch from a Medicare+Choice plan to traditional Medicare. *This is also known as the "lock-in" period.*

### **Custodial Care**

Care given at home or in a nursing home for people with chronic disabilities and long-term illnesses. **Not** covered by Medicare.

### **Medicaid**

A joint federal and state program that pays for health care for people with low income and limited resources. In South Dakota, Medicaid is administered by the Department of Social Services.

### **Medically Necessary**

Services or supplies that:

1. are proper and needed for the diagnosis, or treatment of your medical condition; &
2. are used for diagnosis, direct care, and treatment of your medical condition; &
3. meet the standards of good medical practice in the local community; &
4. are not mainly for the convenience of you or your doctor.

### **Medicare**

The federal health insurance program that covers people 65 & older, certain younger people with disabilities, and people with End State Renal Disease (permanent kidney failure).

### **Medicare + Choice**

New Medicare programs that give you more choices among health plans. Everyone who has Medicare Parts A and B is eligible, except those who have End-Stage Renal Disease.

### **Medicare Savings Program**

Limited versions of Medicaid that help low income persons pay expenses not covered by Medicare.

### **Medicare Summary Notice (MSN)**

A notice that Medicare sends you describing all the services (Part A and B) that were provided over a certain period of time. This has replaced the *Explanation of Medicare Benefits*

### **Medicare SELECT**

A type of Medigap policy that may require you to use specific providers to receive full benefits of the policy.

### **Medigap / Medicare Supplement**

Insurance that is specifically designed to fill gaps in Medicare coverage. Also called **MedSup**.



**Open Enrollment Period (Medigap)**

A one-time only, six month period after you enroll in Medicare Part B, when you can buy any Medigap policy you want. You cannot be denied coverage or charged more because of your health during this time.

**Original Medicare Plan**

You go to any doctor, hospital, or other health care provider who accepts Medicare. You pay the deductible. Medicare pays its share of the Medicare-approved amount, and you (or your insurance) pay the rest.

**Out-Of-Pocket Costs**

Health care costs that you must pay on your own, because they are not covered by Medicare or other insurance.

**Outpatient Care**

Medical or surgical care that does not include an overnight hospital stay.

**Participating Physician or Supplier**

A doctor or medical equipment supplier that agrees to accept assignment on all Medicare claims. Participating providers are allowed to bill you only for Medicare deductible and/or coinsurance amounts. (See *Assignment*.)

**Part A (Medicare)**

Medicare's hospital coverage. Part A pays for inpatient hospital stays, care in a skilled nursing facility, home health care, and hospice care. (See *Hospital Insurance*.)

**Part B (Medicare)**

Medicare's medical coverage. Part B helps pay for doctors' services, outpatient hospital care, durable medical equipment, and some medical services not covered by Part A.

**Pre-existing Condition**

A medical condition diagnosed or treated in the six months before you joined a health insurance plan. Medigap policies may not cover treatment of pre-existing conditions for as long as six months after you enroll.

**Premium**

The money you pay for health care coverage to Medicare, an insurance company, or a health care plan.

**Preventive Care**

Care to keep you healthy or prevent illness, such as cancer screening, mammograms, and flu shots.

**Procedure**

Something done to fix a health problem or to learn more about it. Examples: surgery, tests, and putting in an IV (intravenous line).

**Provider**

A doctor, hospital, health care professional, or health care facility.

**Private Fee For Service Plan (PFFS)**

A private insurance plan that accepts Medicare beneficiaries. You may go to any doctor or hospital you want. The insurance plan, not Medicare, decides how much you pay for the services you get. You may pay more for Medicare-covered benefits. The PFFS may also provide benefits the Original Medicare Plan does not cover. *Medicare + Choice*.

**Qualified Medicare Beneficiary (QMB)**

A government program that helps low income people afford Medicare. It pays the Part B premium and Medicare deductibles and coinsurance.

**Quality Improvement Organization (QIA)**

The organization that contracts with Medicare to oversee quality of patient care.

**Secondary Payer**

The insurance company that pays second on a claim for medical care. This could be Medicare, Medicaid, or other health insurance depending on the situation.

**State Health Insurance Assistance Programs**

Counseling programs that Medicare has helped fund in each state to help seniors and other Medicare beneficiaries better understand and cope with Medicare and health insurance. This book was published by South Dakota's program, called **SHINE**.

**Skilled Nursing Care**

Health care that must be given or supervised by licensed nurses under the general direction of a doctor. Examples: intravenous injections, tube feeding, oxygen to help you breathe, and changing sterile dressings on a wound.

**Skilled Nursing Facility (SNF)**

A facility that provides skilled nursing or rehabilitation services to help you recover after a hospital stay.

**Specified Low-Income Medicare Beneficiaries (SLMB)**

A Medicaid program that pays Medicare Part B premiums for individuals who have Medicare Part A, a low monthly income, and limited resources.

**Waiting Period**

The time between when you enroll with a Medigap insurance company or Medicare health plan and when your coverage starts. This can be as long as 6 months for some health conditions. See *Pre-existing Condition*.

# Medicare Publications

- Medicare has many books and pamphlets that focus on specific aspects of the Medicare system.
- You can order a copy of any of the following publications by phone
- If you use the internet, you can read all of these at Medicare website.  
[www.medicare.gov](http://www.medicare.gov)

## Basic Information

### ***About Medicare***

A brochure explaining the Medicare.gov web site and what it contains.

### ***Medicare & You 2004***

Summary of Medicare benefits, rights and obligations, and answers to the most frequently asked questions about Medicare. A copy is mailed to every Medicare household each fall.  
***Available in large print***

### ***Medicare and Your Mental Health Benefits***

A brochure explaining mental health benefits, who is eligible, and how payment is made in the Original Medicare Plan.

### ***Medicare Coverage of Skilled Nursing Facility Care***

A brochure explaining Medicare covered skilled care, your rights and protections, and where you can get help with your questions.

### ***Home Health***

A brochure explaining Medicare's home health benefit.

### ***Medicare Coverage of Kidney Dialysis and Kidney Transplant Services***

Information on Medicare coverage of kidney dialysis and transplant services.

### ***Medicare Hospice Benefits***

A booklet explaining Medicare benefits for terminally ill people, and how to find a hospice program.

### ***Your Medicare Benefits***

A description of your coverage under Part A and Part B.

### ***Your Guide to the Outpatient Prospective Payment System***

A brochure explaining payment for most outpatient services you get in a hospital or community mental health center in the Original Medicare Plan, your rights and protections, and where you can get help with your questions.

### ***Medicare and Other Health Benefits: Your Guide to Who Pays First***

A brochure explaining how Medicare works with other types of insurance, who should pay your bills first, and where to get more help.

### ***Do You Need Help to Pay Health Care Costs? (Help in Paying Health Care Costs)***

Brochure explaining where you can get help to pay for health care costs.

### ***Does Your Doctor or Supplier Accept Assignment?***

A pamphlet explaining assignment and how it works.

### ***Medicare Savings for Qualified Beneficiaries***

Guide to help in paying Medicare out-of-pocket expenses for some low-income persons.

### ***Private Contracts with Doctors and Other Practitioners Who Have Decided Not to Provide Services Through the Medicare Program***

A brief explanation of Private Contracts.

To Order a Publication by Phone: 1-800-633-4227  
Medicare On-Line:  
[www.medicare.gov](http://www.medicare.gov)



## Medicare Plan Options

### **2003 Guide to Health Insurance for People with Medicare**

An information guide to help beneficiaries with purchasing Medigap supplemental insurance, using Medigap supplemental insurance and other kinds of health insurance. *Available in a large print format.*

### **Medicare Health Plans Non-Renewal Fact Sheet**

A fact sheet that explains your options if a managed care plan ends its contract with Medicare.

## Health Care Choices

### **Guide to Medicare Medical Savings Accounts**

Overview of Medicare Medical Savings Accounts.

### **Medicare Medical Savings Account Plan Offers You a New Option**

A brief introduction to the new Medicare Medical Savings Account Plan option.

### **Understanding Your Medicare Choices**

A brief description of the Medicare health plan options.

### **Medicare and Ambulance Payments**

### **Your Guide to Private Fee for Service Plans**

A guide explaining private fee for service plans.

### **A Guide for People With Medicare - Choosing a Doctor**

A guide to what you need to know about choosing a doctor.

### **A Guide for People with Medicare - Choosing a Hospital**

A guide to what you need to know about choosing a hospital.

### **A Guide for People With Medicare - Choosing Treatments**

A guide to what you need to know about choosing a treatments.

### **Getting a Second Opinion Before Surgery - Your Choices and Medicare Coverage**

A guide to what you need to know before surgery about getting a second opinion.

### **Guide to Choosing a Nursing Home**

A step-by-step process and key resources to help you choose a nursing home.

### **Nursing Home Brochure**

A brochure including important facts on choosing a nursing home.

## Your Medicare Rights & Protection

### **Consumer Fraud Pamphlet: Medicare and Home Medical Equipment**

This pamphlet tells you how to get home medical equipment and report suspected fraud. It guides you in obtaining the home medical equipment you need, at the lowest cost to you and to the government.

### **Fraud and Abuse**

Explains how to identify fraud and abuse, and how to protect yourself and the Medicare program.

### **Medicare Appeals and Grievances**

Explains your Medicare appeal rights.

### **Medicare Patient Rights**

A brief description of your rights as a Medicare beneficiary.

To Order a Publication by Phone: 1-800-633-4227  
Medicare On-Line: [www.medicare.gov](http://www.medicare.gov)

***Medicare Supplemental Insurance Medigap Policies and Protections***

A booklet explaining Medigap policies and what they cover, your rights to buy a Medigap policy when your health coverage changes, and where to get help.

***Medicare's Incentive Reward Program for Fraud and Abuse***

This publication describes how to get a reward for information leading to the recovery of Medicare funds from health care providers who engage in fraud and abuse in the Medicare program.

**Health Information**

***Pap Tests: A Healthy Habit for Life***

A brochure explaining pap tests.

***Colorectal Cancer - Let's Break the Silence Brochure***

A brochure explaining the importance of Colorectal screening and early detection.

***Now! Expanded Coverage for Diabetes Brochure***

A brochure explaining what Medicare covers related to diabetes.

***Dialysis Keeps People with Kidney Failure Alive...Are You Getting Adequate Hemodialysis?***

A brochure explaining kidney failure and dialysis.

***Preparing for Emergencies: A Guide for People on Dialysis***

A guide for people in emergency situations on dialysis.

***Medicare Preventive Services***

Benefits to help you stay healthy.

**Other**

**Internet Resources**

There is a **lot** of information on the internet about Medicare and health insurance.

Many insurance companies have websites that let you request information or even fill out an application on-line.

The Kaiser Foundation has an on-line publication that SHINE counselors have found very helpful:

***Talking to Your Parents***

***About Medicare and Health Coverage***

[www.kff.org/docs/parents/](http://www.kff.org/docs/parents/)

To Order a Publication by Phone: 1-800-633-4227

Medicare On-Line: [www.medicare.gov](http://www.medicare.gov)

# Medicare's Medigap Guide

Every insurance company that sells Medigap insurance must give each new customer a copy of a book that Medicare revises every year.

## ***2004 Guide to Health Insurance for People With Medicare***

Although it may have the company's name on the cover, the book is written by Medicare and explains both Medicare and your insurance choices.

You can also get the **Guide** directly from Medicare.

1-800-633-4227

On-line?

[www.medicare.gov](http://www.medicare.gov)

The cover looks something like this

## Choosing A Medigap Policy

2004 Guide to Health  
Insurance for People  
With Medicare

For People in the Original  
Medicare Plan

This Guide has easy steps to help  
you buy Medicare Supplement  
Insurance



Developed jointly with the  
National Association of Insurance Commissioners

## Check Out the Company

Insurance companies promise to provide benefits (pay money) in the future.

What you want to know is whether the company will have the money and be able to pay when you need it.

There is no guaranteed way to predict the future. However, it may help to see how financial experts rate the company today.

### Rating Companies are Private & Not endorsed by SHIINE

The South Dakota Division of Insurance and the Senior Health Information and Insurance Education (SHIINE) program do not recommend or rate insurance companies or endorse the ratings of any private firms.

However, the private firms below do compile financial ratings of insurance companies. These ratings carry no guarantee of accuracy but can provide you with information on how some analysts view the health of particular insurance companies.

### Different Grading Systems

Each rating agency uses its own grading system, an "A" or even "A+" could actually be a fairly low grade, if the rating agency's highest grade is AAA+.

Each company has an explanation of its rating system.

Although some or all of these companies will provide ratings over the phone, they might charge you for the service.

If you use the internet, Weiss charges a \$7.95 fee for each company's rating.

Publications for most of these rating companies should be available for free at your local library.

Rating Company	Phone Number	On-Line
A. M. Best Company .....	(908) 439-2200 .....	<a href="http://www.ambest.com">www.ambest.com</a>
Fitch Ratings. ....	800-75-FITCH .....	<a href="http://www.fitchratings.com">www.fitchratings.com</a>
Moody's Investor Service .....	(212) 553-0377 .....	<a href="http://www.moodys.com">www.moodys.com</a>
Standard & Poor's .....	(212) 438-2400 .....	<a href="http://www.standardpoor.com">www.standardpoor.com</a>
Weiss Research, Inc. ....	(800) 289-9222 .....	<a href="http://www.weissratings.com">www.weissratings.com</a>

### South Dakota Guaranty Fund

The State protects all South Dakota consumers against the possibility that your health insurance company will go bankrupt.

All companies licensed to do business in South Dakota contribute to the South Dakota Health and Life Insurance Guaranty Fund. This is a pool of money that is used to pay claims if an insurance company is liquidated (similar to bankruptcy). This fund is subject to substantial limitations and exclusions and requires continued residency in South Dakota

# State Health Insurance Assistance Programs Across the Country

Every state and territory has a program to answer questions about Medicare and Supplemental Insurance (Medigap) Policies, Medicare health plan choices, and help consumers understand Medicare or private health insurance papers. These programs are generally known as State Health Insurance Assistance programs. Each state program has its own name. In South Dakota, the State Health Insurance Assistance program is also known as SHIINE.

Use this nationwide directory if you or a family member need health insurance counseling or other assistance outside South Dakota. Toll-free numbers for other states may not work from South Dakota.

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Alabama .....	800-243-5463 or 334-242-5788	Nebraska .....	800-234-7119 or 402-471-2201
Alaska .....	800-478-6065 or 907-269-3680	Nevada .....	800-307-4444 or 702-486-3796
American Samoa	808-586-7299	New Hampshire ..	800-852-3388 or 603-271-4925
Arizona .....	800-432-4040 or 602-542-4446	New Jersey .....	800-792-8820 or 609-943-3378
Arkansas .....	800-224-6330 or 501-371-2782	New Mexico .....	800-432-2080 or 505-827-7640
California .....	800-434-0222 or 916-323-9525	New York .....	800-333-4114 or 518-473-5108
Colorado .....	800-544-9181 or 303-894-7499	North Carolina ....	800-443-9354 or 919-733-0111
Connecticut .....	800-944-9422 or 860-424-5244	North Dakota .....	800-247-0560 or 701-328-9604
Delaware .....	800-336-9500 or 302-739-6266	N. Marianas .....	808-568-7299
Florida .....	800-963-5337 or 850-414-2060	Ohio .....	800-686-1578 or 614-644-3458
Georgia .....	800-669-8387 or 404-657-5347	Oklahoma .....	800-763-2828 or 405-521-6628
Guam .....	800-669-8387	Oregon .....	800-722-4134 or 503-947-7263
Hawaii .....	800-586-4797 or 808-586-7299	Pennsylvania .....	800-783-8975
Idaho .....	800-247-4422 or 208-334-4350	Puerto Rico .....	877-725-4300
Illinois .....	800-548-9034 or 217-782-0004	Rhode Island .....	800-322-2880 or 401-222-2858
Indiana .....	800-452-4800 or 317-233-3551	South Carolina ...	800-868-9095 or 803-898-2850
Iowa .....	800-351-4664 or 515-242-5190	South Dakota .....	800-536-8197 or 605-773-3656
Kansas .....	800-860-5260 or 316-337-6010	Tennessee .....	800-536-8197 or 615-780-7136
Kentucky .....	502-564-7372	Texas .....	800-252-9240 or 512-424-6874
Louisiana .....	800-259-5301 or 225-342-6334	Utah .....	800-541-7735 or 801-538-3910
Maine .....	800-750-5353 or 207-624-5335	Vermont .....	800-642-5119 or 802-748-5182
Maryland .....	800-243-3425 or 410-767-1074	Virgin Islands .....	340-778-6311 ext. 2338
Massachusetts ...	800-822-2003 or 617-222-7435	Virginia .....	800-552-3402 or 804-662-9333
Michigan .....	800-803-7174 or 517-622-5226	Washington .....	800-397-4422 or 206-389-2752
Minnesota .....	800-333-2433 or 612-333-2433	Washington, D.C.....	202-496-6240
Mississippi .....	800-948-3090 or 601-359-4956	West Virginia .....	800-987-4463 or 304-558-3317
Missouri .....	800-390-3330 or 573-893-7900	Wisconsin .....	800-242-1060 or 608-267-3201
Montana .....	800-332-2272 or 406-585-0773	Wyoming .....	800-856-4398 or 307-777-7401

**In South Dakota  
Call SHIINE!  
1-800-536-8197**

## Handy Phone Numbers

Voice

TTY/TDD

**Medicare** ..... 1-800-MEDICARE . ....1-877-486-2048

**Medicare Part B (Noridian)** ..... 1-800-437-4762 ..... 1-888-552-9336

Questions about Part B coverage, bills & medical service; information on how to recognize Medicare fraud & abuse; Medicare publications.

**Medicare Part A (Cahaba)** .....1-877-910-8139..... 1-800-255-0056

Questions about Part A bills & service, hospital care, skilled nursing care; fraud & abuse

**Medicare Fraud** ..... 1-800-423-2449

**Durable Equipment Claims (Cigna)** ..... 800-899-7095 ..... 1-800-970-7494

Questions about bills for durable medical equipment; list of approved equipment suppliers.

**SHINE (Insurance counseling)** ..... 1-800-536-8197

Trained volunteers help you understand and cope with Medicare, Medigap, Medicaid; various publications.

**Division of Insurance** ..... (605) 773-3563

Confirm whether insurance company is licensed to sell in South Dakota; register complaint about insurance company handling of claims, applications, etc.

**Social Security** ..... 1-800-772-1213

Enroll in Medicare; confirm your eligibility for Social Security; problems with Social Security check.

**South Dakota Foundation for Medicare Care** ..... (800) 658-2285

Medicare Peer Review Organization(PRO). Call about quality of care concerns, filing an appeal or complaint, or with question about your rights as a hospital patient.

**South Dakota Department of Social Services** ..... (605) 773-3495

Apply for Medicaid; other health care assistance for low income persons.

### SHINE

Phone: 1-800-536-8197 (Sioux Falls)

1-800-742-8602 (Rapid City Branch)

fax: 605-773-6834 shiine@cfag.org

Adult Services & Aging

email: ASAGing@dss.state.sd.us

website: <http://www.state.sd.us/social/asa/>

South Dakota on-line  
<http://www.state.sd.us>



## County Offices

County	Adult Services & Aging	Economic Assistance
Aurora .....	995-8000	942-7150
Beadle .....	353-7112	353-7105
Bennett .....	685-6521	685-6521
Bon Homme .....	668-3030	589-4219
Brookings .....	688-4330	688-4332
Brown .....	626-3145	626-2381
Brule .....	734-4500	734-4500
Buffalo .....	734-4500	734-4500
Butte .....	892-2731	892-2731
Campbell .....	845-2922	845-2922
Charles Mix .....	487-7607	487-7607
Clark .....	353-7112	472-4220
Clay .....	677-6800	677-6800
Codington .....	882-5003	882-5000
Corson .....	845-2922	845-2922
Custer .....	745-5100	673-4347
Davison .....	995-8000	995-8000
Day .....	345-3432	345-3432
Deuel .....	874-2528	874-2528
Dewey .....	845-2922	
Timber Lake .....		865-3594
Eagle Butte .....		964-8240
Douglas .....	487-7607	487-7607
Edmunds .....	626-3145	626-2381
Fall River .....	745-5100	745-5100
Faulk .....	626-3145	353-7105
Grant .....	882-5003	432-9588
Gregory .....	842-0400	775-2683
Haakon .....	773-3613	773-3612
Hamlin .....	882-5003	882-5000
Hand .....	353-7112	353-7105
Hanson .....	995-8000	995-8000
Harding .....	892-2731	892-2731
Hughes .....	773-3613	773-3612
Hutchinson .....	387-4219	387-4219
Hyde .....	773-3613	773-3612
Jackson .....	685-6521	685-6521
Jerauld .....	995-8000	539-1261
Jones .....	773-3613	259-3101
Kingsbury .....	688-4330	688-4330

County	Adult Services & Aging	Economic Assistance
Lake .....	256-5683	256-5683
Lawrence		
Deadwood .....	578-2402	578-2402
Belle Fourche...	892-2731	578-2402
Lincoln .....	367-5400	764-5761
Lyman		
Chamberlain ...	734-4500	734-4500
Pierre .....	773-3613	734-4500
Marshall .....	626-3145	448-5371
McCook .....	367-5400	425-2271
McPherson .....	626-3145	
McPherson .		439-3444
Aberdeen ...		626-3160
Meade .....	347-2588	347-2588
Mellette .....	856-4489	259-3101
Miner .....	772-5770	772-5770
(Wed.)		(Mon.)
256-5683		256-5683
(M,T,Th,F)		(T,W,Th,F)
Minnehaha .....	367-5400	367-5500
Moody .....	688-4330	997-2447
Pennington .....	394-2434	394-2525
Perkins .....	845-2922	374-5602
Potter .....	845-2922	845-2922
Roberts .....	698-7673	698-7673
Sanborn .....	995-8000	796-4519
Shannon .....	867-5861	867-5861
Spink .....	472-2230	472-2230
Stanley .....	773-3613	773-3612
Sully .....	773-3613	773-3612
Todd .....	856-4489	856-4489
Tripp .....	842-0400	842-0400
Turner .....	367-5400	297-3251
Union .....	677-6800	356-3346
Walworth .....	845-2922	845-2922
Yankton .....		
Yankton .....	668-3030	668-3030
Gayville .....	677-6800	668-3030
Volin .....	677-6800	668-3030
Ziebach .....	845-2922	365-5175

SHIINE

1-800-536-8197



??'s

Call SHIINE !

### SHIINE Insurance Counseling

The Senior Health Information and Insurance Education program (SHIINE) is a free peer counseling service of the Department of Social Services.

Call SHIINE if there is something you don't understand about Medicare or private supplemental insurance or if you need help in examining or understanding the benefits of a health insurance policy.

1-800-536-8197

### About SHIINE

**SHIINE** is a federally funded program. SHIINE has recruited and trained volunteer counselors across the state of South Dakota.

SHIINE counselors assist senior citizens who have problems with or questions about Medicare or private Medicare supplemental and long-term care insurance.

SHIINE's services are free to the citizens of South Dakota.

### One-to-One Counseling

SHIINE's trained volunteers counsel seniors on a one-to-one basis, and the information is kept strictly confidential.

### SHIINE Counselors can...

- ☒ answer questions about Medicare and supplemental insurance products;
- ☒ help submit claims for private insurance and Medicare;
- ☒ help solve problems with health insurance companies, Medicare, and Medicaid.

### SHIINE Needs Volunteers!

SHIINE Volunteers attend a 3-day training and receive training on Medicare Parts A & B, Medigap/MedSup and Long-Term Care Insurance as well as the Medicare Savings Program.

Want to be trained to help yourself and other Medicare beneficiaries in your county navigate the Medicare maze?

call 1-800-536-8197

### SHIINE Speakers Available

- ☐ Medicare Parts A & B
- ☐ Medicare health plan choices
- ☐ Medigap/Medicare Supplemental Insurance
- ☐ Long Term Care Insurance
- ☐ Medicare Savings Programs
- ☐ Preventive Services Covered by Medicare
- ☐ Protection from Medicare fraud

1-800-536-8197 (Sioux Falls)

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fax: 605-773-6834

shiine@cfag.org